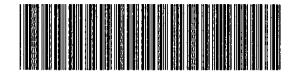
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(Re	questor's Name)	
(Ade	dress)	· · · · · · · · · · · · · · · · · · ·
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(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(2)		
On Alfred On the co	0-484-	5 04-4
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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2013 SEP 23 AM II: 35

SEP 2 4 2013 T. HAMPTON

COVER LETTER

TO: Registration : Division of Co				
SUBJECT: HTM	1L Marketing,	LLC		
SUBJECT:		ed Liability Comp	pany	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	of Organization and fee(s) are	submitted for filin	g.	
Please return all corres	pondence concerning this matt	er to the following	g:	
Erica C	hapman			
		Name of Person		
HTML	Marketing, LL	С		
		Firm/Company		
3506 W	/. Azeele St.,	#102		
		Address		
Tampa	, FL 33609			
erica@h	cii atml-marketing.c	y/State and Zip Coc	le	
encawn	E-mail address: (to be used		ort notification)	
For further information	concerning this matter, please	call:		
Erica Char	oman	,,941	822-93	317
	of Person	Area Cod	e & Daytime Teler	hone Number
Enclosed is a check f	or the following amount:			
■\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 Fili Certified Co (additional co	_	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Divisior Clifton I 2661 Ex	Courier Address tion Section of Corporations Building ecutive Center C see, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:						
The name of the Limited Liability Company is:						
HTML Marketing, LLC						
(Must end with the words "Limited Liabili	ity Company,	"L.L.C.," or "LLC.'	')			
ARTICLE II - Address:						
The mailing address and street address of the pri	incipal off	ice of the Limit	ted Liabi	lity Con	npany	is:
D. C. C. LOCT LAND	N. 4. 111	4 7 7				
Principal Office Address:	Walling	Address:				
3506 W. Azeele St., #102	3506 W.	Azeele St., #102	2			
Tampa, FL 33609	Tampa, I	FL 33609				
						
ARTICLE III - Registered Agent, Registered	Office P	Dogistared A.	aantia Si		••	
The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)						
The name and the Florida street address of the re	egistered a	gent are				
	-6	8				
Erica Chapman Name						
Name						
3506 W. Azeele St., #102						
Florida street add	ress (P.O. B	ox <u>NOT</u> acceptab	le)			
Tampa	FL	33609				
City, Sta	te, and Zip					
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capaciall statutes relating to the proper and complete and accept the obligations of my position as regional Registered Agent's Signature	his certific ity. I furth e performa gistered ag	ate, I hereby acter agree to compare to compare to compare to compare to compare the contract as provided	cept the a ply with a s, and I a	appointn the prov ım famil	nent as isions iar wil 608, F.	s of th
(CONTINU	UED)			SECRE NA	2013 SEP 2	
D 1 .C4	,			11.		·

Page 1 of 2

2013 SEP 23 AH II: 35

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MORIM — Managing Member	
MGR	Erica Chapman
	3506 W. Azeele St., #102
	Tampa, FL 33609
LE V: Effective date, if other than the ffective date is listed, the date mus	e date of filing: (OPTION.
LE V: Effective date, if other than the ffective date is listed, the date mus	
LE V: Effective date, if other than the ffective date is listed, the date mus or 90 days after the date of filing.)	
LE V: Effective date, if other than the ffective date is listed, the date mus or 90 days after the date of filing.) REQUIRED SIGNATURE:	et be specific and cannot be more than five busine
REQUIRED SIGNATURE: Signature of a member	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document r the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State
LE V: Effective date, if other than the ffective date is listed, the date mus or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document r the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
LE V: Effective date, if other than the ffective date is listed, the date mus or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a may are that any false information under the degree felony. Erica Chapman	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State yas provided for in s.817.155, F.S.)
LE V: Effective date, if other than the ffective date is listed, the date mus or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a may false information under a may false information constitutes a third degree felony of the first of the	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document r the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
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LE V: Effective date, if other than the ffective date is listed, the date mus or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a may false information under a may false information to constitutes a third degree felong the filing Fees: \$125.00 Filing Fee for Articles of Organical States of Organic	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State yas provided for in s.817.155, F.S.) Apped or printed name of signee
LE V: Effective date, if other than the ffective date is listed, the date mus or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a may false information under a may false information to a third degree felony. Erica Chapman Ty Filing Fees:	er or an authorized representative of a member. 8.408(3), Florida Statutes, the execution of this document rethe penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)