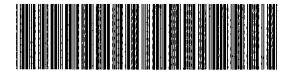
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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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12/20/13--01008--001 **125.00



HILED 13 DEC 20 PM 2: 38 Secretaria de State

K. SALY EXAMINER DEC 26 2013

COVER LETTER

	egistration of C				
SUBJECT	r.	NGM Re	ptiles, LL	C.	
Sebuce	· • ———	Name of Limit	ted Liability Compan	ny	
The enclos	sed Articles o	of Organization and fee(s) are	submitted for filing.		
Please retu	ırn all corres	pondence concerning this mat	ter to the following:		
		Rhono	la Garofa	no	
			Name of Person		
			Firm/Company		
		1281 P	ersian Av	d for filing. following: arofano Person mpany An Ave ress L 34608 d Zip Code Ampaban, rr, com annual report notification) 352 279-6952 Area Code & Daytime Telephone Number 5.00 Filing Fee & \$160.00 Filing Fee,	
	-		Address		
		Spring H	ill, FL 346	808	
_		/1	y/State and Zip Code A Hampa for future annual report	ban r	r, com
For further	information	concerning this matter, please	call:		
Rh	onda	Garofano	_at (352).	279-	6952
	Name	of Person	Area Code &	è Daytime Telep	hone Number
Enclosed	is a check f	or the following amount:			
3 \$125.00∶	Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy	y	Certificate of Status & Certified Copy
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bui 2661 Execu	n Section f Corporations ilding utive Center C	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	EFFECTIVE DATE
	IGM Reptiles, LLC.
(Must end with the	ds "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	dress of the principal office of the Limited Liability Company
rincipal Office Address:	Mailing Address:
281 Persian Ave	1281 Persian Ave
ARTICLE III - Registered A	Spring Hill, FL 34608 nt, Registered Office, & Registered Agent's Signature:
ARTICLE III - Registered A The Limited Liability Company cannot business entity with an active Florida r	nt, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ration.)
ARTICLE III - Registered A The Limited Liability Company cannot business entity with an active Florida r	nt, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ration.)
RTICLE III - Registered A The Limited Liability Company cannot business entity with an active Florida r	nt, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ration.)
RTICLE III - Registered A The Limited Liability Company cannot business entity with an active Florida r	nt, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ration.)
The Limited Liability Company cannot business entity with an active Florida r	nt, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ration.) Iddress of the registered agent are: Rhonda Garofano Name 1281 Persian Ave
ARTICLE III - Registered A The Limited Liability Company cannot business entity with an active Florida r	nt, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ration.)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REOUTED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" =	Managar	Name and Address:
	= Managing Member	
MGR M		Rhonda Garofano
	·	1281 Persian Ave.
		Spring Hill, FL 34608
(Use attac	chment if necessary)	
•	• ·	10/10/10/10
		date of filing: $\frac{12/19/20/3}{19/20/3}$. (OPTIONAL)
	ate is listed, the date must ys after the date of filing.)	be specific and cannot be more than five business d
or to or 50 day	ys after the date of filing.	
DE OVUE	DD GLOW A TUBE	
REQUIR	<u>RED</u> SIGNATURE:	
	Q.	rivida Garazano
	Signature of a member	r or an authorized representative of a member.
	constitutes an affirmation under I am aware that any false inform	.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in s.817.155, F.S.)
		Rhonda Garofano
	Tvr	ped or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)