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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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7APR 2 2 2014 D. BRUCE

## Lucas A. Toca 18540 S.W. 88<sup>th</sup> Road Cutler Bay, Florida 33157 Telephone No. (305) 336-3363

April 10, 2014

### Via U.S. Mail, Certified Return Receipt

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Articles of Organization for Florida Limited Liability Company Performance Junkies, LLC

Dear Sir/Madam:

I enclose the requisite Cover Letter and Articles of Organization for Florida Limited Liability Company for the formation of "Performance Junkies, LLC." I also enclose my personal check made payable to the Florida Department of State, Division of Corporations in the amount of \$160.00.

If you have any questions or require further information, please call me.

Thank you.

Sincerely,

Lucas A. Toca

LAT/pfg

Enclosures: [as noted.]

Lucastoca

# COVER LETTER

TO:	Registration Division of	n Section Corporations				
SUBJE	ECT: <u>PERF</u> (	DRMANCE JUNKIES, LLC Name of Li	mited Liability Company	·····		
The en	closed Articles	s of Organization and fee(s) a	re submitted for filing.			
Please	return all corre	espondence concerning this n	natter to the following:			
	LLICAS	A. TOCA	•			
	LOCAO	n. 100A	Name of Person	····	_	
	DEDEO	DAMANGE HINIZIEG LLG				
	PERFOR	RMANCE JUNKIES, LLC	Firm/Company		-	
	<u>18540 S</u>	.W. 88TH ROAD	Address		_	
			Address	- Ten	20	
	CUTLER	BAY, FLORIDA 33157		The second secon	2014 A	CO
	99,155		City/State and Zip Code	The state of the s	APR	2 Mp2
LU	CAS.TOCA	@GMAIL.COM_		S	8	1
		E-mail address: (to be use	d for future annual report notifica	ntion)	70	
For furt	ther information	on concerning this matter, ple	ase call:	<u> </u>	PH 5: 07	; sec
				<u>경</u> 화 주무	. 0	""
LUCAS	STOCA	at ( ;	305 ) 336-3363	34*\$ ·	. ~	
	Nar	me of Person		lephone Number		
Enclose	ed is a check fo	or the following amount:				
_	0 Filing Fee	□\$130.00 Filing Fee &	□\$155.00 Filing Fee &	☑\$160.00 Filing Fee,		
<b>4123.0</b> 0	o rung ree	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status Certified Copy (additional copy is encl		
		iling Address istration Section	Street/Courier Adda Registration Section	ress		
	Div	ision of Corporations	Division of Corporat	ions		
		. Box 6327 ahassee, FL 32314	Clifton Building 2661 Executive Cent	er Circle		
	1 211	anassee, 1.F. 27314	2001 EXECUTIVE CENT	or oncie		

Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limite	ed Liability Company is:		
PERFORMANCE JU	INKIES II C		
		ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Addre	SS:		
The mailing address an	d street address of the princip	al office of the Limited Liability Company is:	
Principal Office Addr	ress:	Mailing Address:	
10540 0 141 00711 5:	040	18540 S.W. 88TH ROAD	
<u> 18540 S.W. 881H R</u>	UAU	10040 3.W. 00111 NOAD	
CUTLER BAY, FLOF  ARTICLE III - Regist The Limited Liability	RIDA 33157 tered Agent, Registered Offi	ce, & Registered Agent's Signature: win Registered Agent. You must designate an individual	ual o
ARTICLE III - Regist The Limited Liability another business entity	tered Agent, Registered Offi Company cannot serve as its of	ce, & Registered Agent's Signature: wn Registered Agent. You must designate an individuation.)	ual o
ARTICLE III - Regist The Limited Liability another business entity	tered Agent, Registered Offi Company cannot serve as its of with an active Florida registr	ce, & Registered Agent's Signature: wn Registered Agent. You must designate an individuation.)	ual o
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ny at 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2



Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	LUCAS A TOCA
	LUCAS A. TOCA 18540 S.W. 88TH ROAD
	CUTLER BAY, FLORIDA 33157
(Use attachment if necessary)	
	ne date of filing: (OPTIONAL)
f filing.)	be specific and cannot be more than five business days prior to or
f filling.) E VI: Other provisions, if any.	
f filing.) E VI: Other provisions, if any.  REQUIRED SIGNATURE:	
f filing.) E VI: Other provisions, if any.  REQUIRED SIGNATURE:	
f filing.) E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of	f a member or an authorized representative of a member.
f filing.)  E VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of the constitutes an affirmation of the constitutes an affirmation.	f a member or an authorized representative of a member. ion 605.0203 (1) (b), Florida Statutes, the execution of this document n under the penalties of perjury that the facts stated herein are true.
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