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(Ře	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

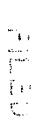


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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: ID1 LLC	
Name of Limi	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Timothy R. Akers	
	Name of Person
Independence Day LLC	F:/O
	Firm/Company
1005 SR 84, Suite #105	Address
	Tital 039
Ft. Lauderdale, FL 33315	y/State and Zip Code for future annual report notification) e call: 22 34 35 36 36 37 38 38 38 38 38 38 38 38 38
tim@brightardayele.com	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	e call:
Timothy D. Alcoro	24) 005 7076
Timothy R. Akers at (95 Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
✓ \$125.00 Filing Fee Certificate of Status	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
ID1 LLC		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "	LLC.")
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Comp	oany is:
Principal Office Address;	Mailing Address:	
1005 SR 84, Suite #105 Ft. Lauderdale, Ft. 33315	1005 SR 84, Suite #105 Ft. Lauderdale, FL 33315	
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its canother business entity with an active Florida registr	own Registered Agent. You must desig ation.)	nate an individual or
The name and the Florida street address of the register	ered agent are:	OIL METANS
Timothy R. Akers		
N	ame	## ₹
1501 SW 52nd Ter.		[설문 2
Florida street address (P.O.	Box NOT acceptable)	그의 호
Plantation	FL 33317	
City	Zip	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Having been named as registered agent and to accept the place designated in this certificate, I hereby accapacity. I further agree to comply with the provisiof my duties, and I am familiar with and accept the C	cept the appointment as registered age ons of all statutes relating to the proper	nt and agree to act in this and complete performance
Churchy	Raha	
Registered Agent's Si	gnature (REQUIRED)	
CONTI	NI (E'D)	

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Independence Day, LLC 1005 SR 84. Suite #105 Ft. Lauderdale, FL 33315
(Use attachment if necessary)	
ective date is listed, the date must be specif	filing: <u>5/20/14</u> . (OPTIONAL) Ac and cannot be more than five business days prior to or 90 days a
ective date is listed, the date must be specif of filing.)	filing: <u>5/20/14</u> . (OPTIONAL) Ac and cannot be more than five business days prior to or 90 days a
EV: Effective date, if other than the date of fective date is listed, the date must be specific of filing.) EVI: Other provisions, if any.	filing: 5/20/14 (OPTIONAL) Ac and cannot be more than five business days prior to or 90 days a
ective date is listed, the date must be specific of filing.) E VI: Other provisions, if any.	Ac and cannot be more than five business days prior to or 90 days a
Recuired Signature of a memb (In accordance with section 605.0	Ac and cannot be more than five business days prior to or 90 days a

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)