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TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Florida Flip Flop LLC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Erich Tschopp Name of Person
Name of Person
Firm/Company
1155 Brickell Bay DR. #2605
Address
Miami, FL 33/3/
Miami, FL 33/3/  City/State and Zip Code  etschope Lyahoo, com  E-mail address: (to be used for future annual report notification)
E-mail address. (to be used for future annual report notification)
For further information concerning this matter, please call:
Erich Tschopp at (862) 206-9498  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \text{\$\sum_{\text{\$130.00}}\$ Filing Fee \$\$\sum_{\text{\$\sum_{\sum_{\text{\$\sum_{\cutext{\$\sum_{\cutext{\$\sum_{\sum_{\text{\$\sum_{\sum_{\cutext{\$\sin_{\cutext{\$\sin_{\sum_{\cutext{\$\sum_{\cutext{\$\sum_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\cutext{\$\sin_{\sin_{\s
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Florida Flip Florida Wust end with the words Limited Lia	op LLC
(Must end with the words <sup>l</sup> 'Limited Lie	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11530 NE 7th Ave. Biscayne Park, FL 33161	1155 Brickell Buy Dr. # 2605 Miami, FL 33131
ARTICLE III - Registered Agent, Registered Office, & I (The Limited Liability Company cannot serve as its own Re another business entity with an active Florida registration.)	
The name and the Florida street address of the registered ag	ent are:
Erich Tschop	
Name	· (公司) 1
1155 Brickell Bay Dr.	#260S
Florida street address (P.O. Box N	OT acceptable)
Migrai City	FL 33/3/ ORD 49
City	Zip 5
the place designated in this certificate, I hereby accept th capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obliga	re of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance attions of my position as registered agent as provided for in 605, F.S.

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
AMBR	Dang Tschopp 1155 Brickell Bay DR, #260	<u>S</u>	
AMBR	Migmi, FL 331311 Charles McDonald III 11530 NE 7th Ave		
	Biscayne Park, FL 33161		
(Use attachment if necessary)			
Tective date is listed, the date must be spe of filing.)	of filing: (OPTION ecific and cannot be more than five business days price		ys af
Tective date is listed, the date must be speed of filing.)  LE VI: Other provisions, if any.			ys af 
Tective date is listed, the date must be speed of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:	ecific and cannot be more than five business days price		ys af 
Required Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	ecific and cannot be more than five business days price	or to or 90 day	
REQUIRED SIGNATURE:  Signature of a met (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this do r the penalties of perjury that the facts stated herein are mation submitted in a document to the Department of S y as provided for in s.817.155, F.S.)	or to or 90 day	ys af
REQUIRED SIGNATURE:  Signature of a met (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this dor the penalties of perjury that the facts stated herein are mation submitted in a document to the Department of S y as provided for in s.817.155, F.S.)	or to or 90 day	2014
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ARTICLE IV-