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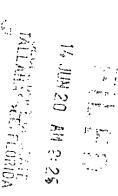
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: House 5 Marketing, LLC Name of Lir	mited Liability Company	
The enclosed Articles of Organization and fee(s) a	re submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Nathan Rohe		
	Name of Person	
House 5 Marketing, LLC		
	Firm/Company	
226 New Gate Loop		
	Address	
Lake Mary. FL 32746		
C	City/State and Zip Code	
nate@rrgtravelmugs.com E-mail address: (to be use	d for future annual report notifica	tion)
For further information concerning this matter, plea	ase cail:	
Nathan Rohe at (407) 403-1010	
Name of Person		ephone Number
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Addr Registration Section Division of Corporat Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
House 5 Marketing, LLC		
(Must end with the words "l	Limited Liability Company, "L.L.C.	," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
226 New Gate Loop Lake Mary, FL 32746	226 New Gate Loop Lake Mary. FL 32746	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as another business entity with an active Florida reg	its own Registered Agent. You must	
The name and the Florida street address of the reg	gistered agent are:	
Nathan Rohe		_
	Name	
226 New Gate Loop Florida street address (P	O. Box NOT acceptable)	_
Lake Mary	FL 32746	_
City	Zip	
Having been named as registered agent and to ac the place designated in this certificate, I hereb capacity. I further agree to comply with the pro of my duties, and I am familiar with and aceep	y accept the appointment as registere visions of all statutes relating to the p	ed agent and agree to act in this proper and complete performance
Registered Agent'	s Signature (REQUIRED)	
`	NTINUED)	
P:	age 1 of 2	William Section 19

<u>Title:</u> "AMBR" = Authorized Members	Name and Address:	
"MGR" = Manager	er	
MGR	Nathan Rohe	
	226 New Gate Loop	
	Lake Mary, FL 32746	
	-	
(Use attachment if necessary)		
ective date is listed, the date m of filing.)	n the date of filing: (OPTIONAlust be specific and cannot be more than five business days prior	L) to or 90
ective date is listed, the date m of filing.)	n the date of filing: (OPTIONAl ust be specific and cannot be more than five business days prior	L) to or 90
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ective date is listed, the date m	n the date of filing:	L) to or 90
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