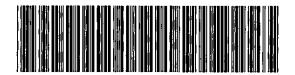
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COVER LETTER

Division of	Corporations		
SUBJECT:	LTGames LLC Name of Lin	nited Liability Company	
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	espondence concerning this m	natter to the following:	
	Lawrence W. Borns, Esq.		
		Name of Person	· · · · · · · · · · · · · · · · · · ·
,			
	Lawrence W. Borns, PA		
•		Firm/Company	•
•		,	63
	412 N. Halifax Avenue		
		Address	SEP
	Daytona Beach, FL 321	18 (State and Sin Co. In	<u>(1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4</u>
		City/State and Zip Code	
	frank.john.luciano.jv@gr	nail.com d for future annual report notifica	tion) UNIX UNIX UNIX UNIX UNIX UNIX UNIX UNIX
			1011) 4 1 5
For further information	n concerning this matter, ple	ase call:	List "
,			
Lawrence W. Borns	ne of Person at (:		
ivar	ne of rerson	Area Code Daytime Tel	ephone Number
Enclosed is a check for	or the following amount:		
☑ \$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Ma	Dian Address	St. 46	,

Mailing Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

LTGames LLC		
	nited Liability Company, "L.L.C.," or "LLC.	")
ARTICLE II - Address:		
The mailing address and street address of the princip	oal office of the Limited Liability Company i	is:
Principal Office Address:	Mailing Address:	
6051 Sanctuary Garden Blvd	6051 Sanctuary Garden Blvd	
Port Orange, FL 32128	Port Orange, FL 32128	
	ice, & Registered Agent's Signature:	an individu
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its another business entity with an active Florida regist The name and the Florida street address of the regist	ice, & Registered Agent's Signature: own Registered Agent. You must designate a ration.)	an individu 2014 SEP
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist. Frank John Luci	ice, & Registered Agent's Signature: own Registered Agent. You must designate a ration.) ered agent are:	2014
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist. Frank John Luci	ice, & Registered Agent's Signature: own Registered Agent. You must designate a ration.)	2014 SEP -8
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist. Frank John Luci	ice, & Registered Agent's Signature: own Registered Agent. You must designate a ration.) ered agent are: ano IV	2014 SEP -8 PM
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist. The name and the Florida street address of the regist. Frank John Luci	ice, & Registered Agent's Signature: own Registered Agent. You must designate a ration.) ered agent are: ano IV ame Garden Blvd	2014 SEP -8
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist. The name and the Florida street address of the regist. Frank John Luci. N 6051 Sanctuary	ice, & Registered Agent's Signature: own Registered Agent. You must designate a ration.) ered agent are: ano IV ame Garden Blvd	2014 SEP -8 PM 3:

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Frank John Luciano IV
	6051 Sanctuary Garden Blvd
	Port Orange, FL 32128
AMBR	Shahmeen Kasim
	602 Tomoka Avenue
	Ormond Beach, FL 32174
	•
•	
•	
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(Use attachment if necessary) EV: Effective date, if other than the extive date is listed, the date must be of filling.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d
E V: Effective date, if other than the cective date is listed, the date must be	date of filing:
E V: Effective date, if other than the cective date is listed, the date must be of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d
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E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member: 605.0203 (1) (b), Florida Statutes, the execution of this documents
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation to	member or an authorized representative of a member: a 605.0203 (1) (b), Florida Statutes, the execution of this documents ander the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation of I am aware that any false in	member or an authorized representative of a member: 605.0203 (1) (b), Florida Statutes, the execution of this documents
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E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation of I am aware that any false in constitutes a third degree for the section constitutes a third degree for the section constitutes at the section constitut	member or an authorized representative of a member: a 605.0203 (1) (b), Florida Statutes, the execution of this documents ander the penalties of perjury that the facts stated herein are true. The formation submitted in a document to the Department of State.