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SECRETARY OF STATE

N. Garages | 101/17/2010

COVER LETTER

TO: **Registration Section Division of Corporations** The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Terrance Weekes
Name of Person For further information concerning this matter, please call: Enclosed is a check for the following amount: \$125.00 Filing Fee

Mailing Address

11

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

130.00 Filing Fee &

Certificate of Status

Street/Courier Address

□\$155.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

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

□\$160.00 Filing Fee,

Certified Copy (additional copy is enclosed)

Certificate of Status &

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	T	ľ	C	LE	1	_	N	ame	:
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The name of the Limited Liability Company is:

TNT Mode & Tolent Agency, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

8231 SW 5th Street 8231 SW 5th St North Lauderdole, FL North Lauderdole, FC 330	300

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Precious Mommy Inc

Name

11348 Royal Palm Blud

Florida street address (P.O. Box NOT acceptable)

Coral Spring-5 FL 33065

City Zip

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	
<u>CEO</u>	Terrance Weeker
	North Laudurdale, FL 3306
111000	
MGr-	Tanisha Smith
	North Landendale, FL 33068
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