## L15000012315

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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FFECTIVE DATE

TO TANK IS PAIR

N. Outros JAN 23 2015

January 8, 2015

**Dear Florida Department of State:** 

Please accept this letter as the cover letter and appropriate information for Soul Swag LLC.

(EIN = 47-2732893)

Name: Tracy Brandt

Address: 12644 Lake Mary Jane Road, Orlando, FL 32832

Phone: 407-306-9464 / 407-758-2370

## **COVER LETTER**

Division of Corporations		
OVER THE COLUMN ASSESSMENT OF THE COLUMN ASSES		
SUBJECT: Soul Swag LLC Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
	1 10 01	
The enclosed Articles of Organization and fee(s) ar	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Tracy Brandt		
	Name of Person	
Soul Super LLC		
Soul Swag, LLC	Firm/Company	
12644 Lake Mary Jane Road	Address	
Orlando, FL 32832	ity/State and Zip Code	
	ny/state and Zip Code	
tracy@tracybrandt.org E-mail address: (to be used	d for future annual report notifica	tion)
For further information concerning this matter, plea	ase call:	
Tracy Brandt at (4  Name of Person		ephone Number
	·	•
Enclosed is a check for the following amount:		
\$125.00 Filing Fee  \$\alpha\$ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	☐\$160.00 Filing Fee, Certificate of Status &
Continuate of Status	(additional copy is enclosed)	Certified Copy
		(additional copy is enclosed)
Mailing Address	Street/Courier Addr	ress
Registration Section Division of Corporations	Registration Section Division of Corporat	ions
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Cent Tallahassee, FL 3230	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Soul Swag, 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 of	ffice of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
12644 Lake mary Jane Road Orlando FL 32832	Same			
ARTICLE III - Registered Agent, Registered Office, of (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.)  The name and the Florida street address of the registered.	Registered Agent. You must designate an individent.)	SECRETAL SECRETA	2015 JAN	FILE
Tracy Brandt Name		SSE C	ū	
12644 Lake Mary Jane Road		FS	PH	
Florida street address (P.O. Box	NOT acceptable)	ORI	2: 2	
Orlando	FL 32832	) m		
City	Zip			
Having been named as registered agent and to accept ser the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obl	t the appointment as registered agent and agree to of all statutes relating to the proper and complete p	act in this performance		

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Tracy Brandt
	12644 Lake Mary Jane Road
	Orlando, FL 32832
<del></del>	
(Use attachment if necessary)	
LE V: Effective date, if other than the date	e of filing: <u>1/6/2015</u> . (OPTIONAL) Decific and cannot be more than five business days prior to or 90 days af
LE V: Effective date, if other than the date fective date is listed, the date must be sp	pecific and cannot be more than five business days prior to or 90 days af
LE V: Effective date, if other than the date fective date is listed, the date must be sp of filing.)  LE VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 days af
LE V: Effective date, if other than the date fective date is listed, the date must be sp of filing.)  LE VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 days af
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LE V: Effective date, if other than the date fective date is listed, the date must be sp of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNAPURE:  Signature of a me	pecific and cannot be more than five business days prior to or 90 days af
LE V: Effective date, if other than the date fective date is listed, the date must be sp of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNAPURE:  Signature of a man (In accordance with section 6)	ember or an authorized representative of a member.  05.0203 (1) (b), Florida Statutes, the execution of this document
LE V: Effective date, if other than the date fective date is listed, the date must be sp of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNAPURE:  Signature of a me (In accordance with section 60 constitutes an affirmation under the constitutes an affirmation under the constitutes are signature.)	pecific and cannot be more than five business days prior to or 90 days af

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)