Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000062120 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: GARY, DYTRYCH & RYAN, P.A.

Account Number : 119990000255

Fax Number

: (561)844-3700

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address: AND@GD

## FLORIDA LIMITED LIABILITY CO. MONSTER MARKETING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	<b>60</b> 03
Estimated Charge	\$125.00

MAR 1 2 2015 J. IBRUCE

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## COVER LETTER

TO	Registration Section Division of Corporations			
SUBJE	CT: Monster Marketing, LLC Name of Li	mited Liability Company		
The en	closed Articles of Organization and fee(s) a	re submitted for filing.		
Please	eturn all correspondence concerning this n	natter to the following:		
	Alvs Nagler Daniels	Name of Person		
		Name of Ferson		
	Gary, Dytrych & Ryan, P.A.	Firm/Company		
		FiltivCompany		
	701 U.S. Highway One, Suite 402			
	·	Address		
	North Palm Beach, FL 33408		AT EV	2015 HAR 1 1
	(	City/State and Zip Code	£5	AR.
<u>1A.</u>	ID@GDR-LAW COM E-mail address: (to be use	ed for future annual report notification)	3355 0 X35	
For fur	her information concerning this matter, ple	ease call:	JP-SI	17 16 HV
<u>ALYS</u>	N. DANIELS, ESQ. at ( Name of Person	561 ) 844-3700  Area Code Daytime Telephone Number	THE PARTY OF THE P	11
	ad is a check for the following amount:  0 Filing Fee	Certified Copy (additional copy is enclosed)  Cartified Copy (additional copy is enclosed)  Certified Copy (additional copy	Status &	1)
	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		

(((H150000621203)))

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Monster Marketing, LLC	IX. I.T. G. W. I. O. T. W.	71.C.W
(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 o	office of the Limited Liability Comp	oany is:
Principal Office Address:	Mailing Address:	
13780 Ishnala Circle Wellington, FL 33414	13780 Ishnala Circle Wellington, FL 33414	
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Plorida registration	n Registered Agent. You must desig	nate an individual or
The name and the Florida street address of the registered	a agent are:	
Alys Nagler Daniels		₹ ≥
Name	4	A 29 29
701 U.S. Highway One, Suite		AAR AAR
Florida street address (P O. Bo	x <u>NOT</u> acceptable)	7
North Palm Beach	FL 33408	SSS T
City	Zip	
Registered Sent's Sign	pt the appointment as registered age of all statutes relating to the proper bligations of my position as registere oter 605, F.S. ature (REQUIRED)	d limited liability company at sint and agree to act in this and complete performance
(CONTINU	(JED)	

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(((H150000621203)))

Title:	Name and Address:
'AMBR" = Authorized Member	
MGR" = Manager MGR	Amy Panzer
MOIN	13780 Ishnala Circle
	Wellington, FL 33414
	7,5001515007.7.4.582.1.1
_	
crive date is listed, the date must be spec	of filing: (OPTIONAL) wific and cannot be more than five business days prior to or 90 days after
E V: Effective date, if other than the date of crive date is listed, the date must be spec f filing.)	of filing: (OPTIONAL) wific and cannot be more than five business days prior to or 90 days after
E V: Effective date, if other than the date of crive date is listed, the date must be specifiding.)  E VI: Other provisions, if any.	of filing: (OPTIONAL)  wific and cannot be more than five business days prior to or 90 days after
E V: Effective date, if other than the date of crive date is listed, the date must be specifiding.)  E VI: Other provisions, if any.	ific and cannot be more than live business days prior to or 90 days after
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E V: Effective date, if other than the date of crive date is listed, the date must be specifiding.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a med (in accordance with section 605 constitutes an affirmation under	pher or an authorized representative of a member.
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