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K.SALY EXAMINER MAY -1 2015

COVER LETTER

SUBJECT: ITang It UP Gutters LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
("Unsturber (00 per
Name of Person
Firm/Company
280 John Knox Rd Apt 141
Address
Tal + 32303
adigler State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
1 / 17/7
(4115 COVET at 994 , 992-7+55
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee \$ \$155.00 Filing Fee \$ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations

TO:

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

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TEMAY - 1 AH H: 4.g

ARTICLE I - Name:

The name of the Limited Liability Company is:

HANG IT UP GUHERS 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:

Principal Office Address:

J80 John Knox Rd

Ast 141

Tal Fl 32303

J89 In Knex Rel APF 141 Tal F/32303

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:

Name

JUN (CNOKKY

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

City

State

7in

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

Manages AMBR Jason Brows 444 Sand Inc. Cr. Midway H. J. 1212 (Use attachment if necessary) RTICLE V: Effective date, if other than the date of filing f an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days and adie of filing.) lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. RTICLE VI: Other provisions, if any. REOUIRED SIGNATURE Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Typed or printed name of signee Elling Fess: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	Title: "AMBR" = Authorized Member	Name and Address:
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