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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VH

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Panic Factory, 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:

Michael Robert Mulvaney

Name of Person

Firm/Company

8624 Venezia Drive, Apt 2430

Address

Orlando, FL 32810

City/State and Zip Code

MMulvaney@FIEA.ucf.edu; Chogston@FIEA.ucf.edu; Cpaschal@FIEA.ucf.edu

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>Michael Robert Mulvaney</u>	<u>954</u>	<u>304-7923</u>
<u>Name of Person</u>	<u>Area Code</u>	<u>Daytime Telephone Number</u>

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

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

**Street Address**

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Panic Factory, LLC

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

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TALLAHASSEE FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

8624 Venezia Drive

Apt 2430

Orlando, FL 32810

Mailing Address:

8624 Venezia Drive

Apt 2430

Orlando, FL 32810

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:

Michael Robert Mulvaney

Name

8624 Venezia Drive, Apt 2430

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

Orlando

FL

32810

City

State

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..*

Michael Mulvaney

Registered Agent's Signature (REQUIRED)

(CONTINUED)

This page serves as an attachment for Article IV.  
Panic Factory, LLC is to have eight (8)  
Authorized Members

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Catherine Soto

897 Fording Island Rd, Apt. 807

Bluffton, SC 29910

AMBR

Dezmond Allanda Rose

13510 Aquiline Road

Jacksonville, FL 32224

AMBR

Scott Andrew Jeffas

3872 Chestwood Ave.

Jacksonville, FL 32277

AMBR

Chen Zhe

201 Hibiscus Ct, 1/2 Upper

Orlando, FL 32801

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Robert Clayton Hogston

252 Okehampton Dr.

Goose Creek, SC 29445

AMBR

Cristin Nicole Paschal

285 Uptown Blvd, Apt 640

Altamonte Springs, FL 32701

AMBR

Michael Robert Mulvaney

8624 Venezia Drive, Apt 2430

Orlando, FL 32810

AMBR

Calvin Wah Lee

5033 Sancerce Cir.

Lake Worth, FL 33462

(Use attachment if necessary)

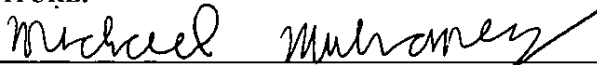
**ARTICLE V:** Effective date, if other than the date of filing: 01/01/2016. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

Michael Robert Mulvaney

Typed or printed name of signee

**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)**