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SECRETARY OF STATE

VH-

## COVER LETTER

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: Than Cards & Games, LLC  |
| SUBJECT: Name of Limited Liability Company  |
|   |
| The enclosed Articles of Organization and fec(s) are submitted for filing.                                    |
| Please return all correspondence concerning this matter to the following:                                     |
| $\mathcal{L}_{\mathcal{L}}$ . $\mathcal{L}_{\mathcal{L}}$   |
| Munzio Carrolla<br>Name of Person   |
|   |
|   |
| Firm/Company  |
| 4930 Suit 4 Perk Blud   |
| Address   |
| Pinellas Park FL 33781  |
| Pinellas Park FL 33781  City/State and Zip Code  togfbrida @ gmail. com                                       |
| tegforda @ gmail. com   |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Nunzio Carrubba at (727) 541-2273   |
| Name of Person Area Code Daytime Telephone Number   |
|   |
| Enclosed is a check for the following amount:   |
| \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certificate of Status & |
| (additional copy is enclosed) Certified Copy  |
| (additional copy is enclosed)   |
| Mailing Address Street Address  |
| New Filing Section New Filing Section   |
| Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building                              |
| Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301                                      |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name:   | $\Gamma / [l, E_i r]$   |
|---|---|
| The name of the Limited Liability Company is:   | 16 m  |
| THAN Cards & Games  (Must end with the words "Limited Liability Co  | 16 JUL 25 PH 2: 56  SECRETARY OF STATE  Ompany. "L.L.C.," or "LLC.") TALL AHASSEE FLORIDA |
| (Must end with the words * Limited Liability Co   | ornpany. L.L.C., or LLC.)   |
| ARTICLE II - Address:<br>The mailing address and street address of the principal office of the I  |   |
| Principal Office Address:   | Mailing Address:  |
| 4930 Park Plud #44 Pinelles Pork FL 23781   | 2930 Park Blud Suite #4 Duellag Feint, Fr. 33781  |
|   |   |
| ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.) |   |
| The name and the Florida street address of the registered agent are:  |   |
| Nonzio C.   | rrubba  |
| Name  |   |
| 15098 Newart  | <u> </u>  |
| Florida street address (P.O. Box  | NOT acceptable)   |
| Cleaniter FL  | 33764   |
| City State  | Zip   |
| aving been named as registered agent and to accept service of proces.   | s for the above stated limited liability company at the                                   |

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

| <u> </u>   | Name and Address:  | 16 JUL 25   |
|--|--|---|
| MGR" = Manager   | N1 C.  | wbb JALINE JARY   |
| MGR  | 15098 Neward   | RI STANSSEE   |
| 1417.0   | Pinelly 12, the 121  |   |
| AMBR   | Johnee Phopuno   | <u>///</u>  |
|  | Saint Peterslavy,  | 17 33909  |
| Commence of the Commence of th |  |   |
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| ctive date is listed, the date must filing.)   | be specific and cannot be more than five bu<br>not meet the applicable statutory filing requi  | siness days prior to or 90  |
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