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## **COVER LETTER**

| TO:               | New Filing Section<br>Division of Corporations  |                  |   |
|-------------------|---|------------------|---|
| SUBJE             | AC APPAREL LLC  |                  |   |
| SUBJE             |   | Limited Liabil   | ity Company   |
| The enc           | losed Articles of Organization and fee(s  | ) are submitted  | for filing.   |
| Please re         | eturn all correspondence concerning this  | matter to the f  | ollowing:   |
|                   | ANTHONY CAMPANA   |                  |   |
|                   |   | Name of          | Person  |
|                   | AC APPAREL  |                  |   |
|                   |   | Firm/Co          | mpany   |
|                   | 1318 FRANCISCO DRIVE  |                  |   |
|                   |   | Addr             | ess   |
|                   | TALLAHASSEE, FI 32304   |                  | ·<br>•  |
|                   | SHOPFROSTEES@GMAIL.COM  | City/State and   | d Zip Code  |
|                   | E-mail address: (to be u  | sed for future a | nnual report notification)  |
| or furthe         | r information concerning this matter, ple   | ease call:       |   |
|                   | ANTHONY CAMPANA   | 772              | 480 - 2284  |
|                   | Name of Person  | Area Code        | Daytime Telephone Number  |
| Enclosed          | d is a check for the following amount:  |                  | į   |
| <b>]\$</b> 125.00 | Filing Fee \$130.00 Filing Fee & Certificate of Status  | L—lCertific      | 0 Filing Fee & S160.00 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

| AREICESOF ORGANIZATION POR PROPERTIES DA  |                            |                  | ID EADIGIT COM AN                            | FILED               |  |  |
|---|----------------------------|------------------|--|---------------------|--|--|
| ARTICLE I - Name:<br>The name of the Limited Liability  | y Company is:              |                  |  | 2011 1111 1102      |  |  |
| AC APPAREL LLC (Must conta  | un the words "Limited L    | iability Compa   | ny, "L.L.C.," or "LLC.")                     | 11.75. <u>1</u> .5. |  |  |
| ARTICLE II - Address:<br>The mailing address and street ac  | ldress of the principal of | ice of the Limi  | ted Liability Company is:                    |                     |  |  |
| <u>Principa</u>   | al Office Address:         |                  | Mailing Addres                               | <u>ss</u> :         |  |  |
| 1318 FRANCISCO E<br>TALLAHASSEE, FL   |                            |                  | 318 FRANCISCO DRIVE<br>TALLAHASSEE, FL 32304 |                     |  |  |
| (The Limited Liability Company<br>another business entity with an a<br>The name and the Florida street a          | ctive Florida registration | .)               | nt. You must designate an indi               | vidual or           |  |  |
|   | ANTHONY CAMPA              | NA               |  |                     |  |  |
|   |                            | Name             |  |                     |  |  |
|   | 1318 FRANCISCO D           | RIVE             |  |                     |  |  |
|   | Florida street address     | (P.O. Box NO     | T acceptable)                                |                     |  |  |
|   | TALLAHASSEE                | FL               | 32304  |                     |  |  |
|   | City                       | State            | Zip  |                     |  |  |
| Having been named as registered a<br>place designated in this certificate,<br>further agree to comply with the pr | I hereby accept the appo   | intment as regis | stered agent and agree to act in             | this capacity. 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)

## ARTICLE IV-

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

| Title:   |   | Name and Address:  |  |   |   |
|--|---|--|--|---|---|
| "AMBR" = Authorized Men  | ber   |  |  |   |   |
| "MGR" = Manager  |   |  |  |   |   |
| AMBR   |   | ANTHONY CAMPANA  |  |   |   |
|  |   | 1318 FRANCISCO DRIVE   | Ξ Ι  |   |   |
|  |   | TALLAHASSEE, FL 3230   | 14   |   |   |
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