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Certified Copies	_ Certificates	of Status		
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K. Brumbley

COVER LETTER

TO:	New Filing Section Division of Corporations				
	THUNDER MARKETING LLC				
SUBJEC	Name of Limited Liability Company				
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please re	cturn all correspondence concerning this matter to the following:				
	CHRISTOPHER FREDERICK				
	Name of Person				
	THUNDER MARKETING LLC				
	Firm/Company				
	146 STAR SHELL DRIVE				
	Address				
	APOLLO BEACH, FL 33572				
	City/State and Zip Code				
	CFMAGIC@ICLOUD.COM E-mail address: (to be used for future annual report notification)				
For furth	er information concerning this matter, please call:				
	CHRISTOPHER FREDERICK 301 639-1741				
	Name of Person Area Code Daytime Telephone Number				
Enclos	ed is a check for the following amount:				
	\$130.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & 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

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability	Company is:					
	TO LLC			••		
THUNDER MARKE (Must conta	in the words "Limited Lia	ability Compar	ny, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street ad	dress of the principal offi	ce of the Limi	ed Liability Company is:			
Principal Office Address:			Mailing Address:			
146 STAR SHELL DRIVE			146 STAR SHELL DRIVE			
APOLLO BEACH, F	L 33572	<u>A</u>	POLLO BEACH, FL 33572			
(The Limited Liability Company another business entity with an a	ctive Florida registration.	.) agent are:		SECTE TALLAR	2813 00	• ~
		Name		78.78 78.78	37 18	: • •
Florida street address (P.O. Box NOT acceptable)		हुस को ह	. 	j*;-		
	Florida street address	(F.O. DOX <u>140</u>			AK 8	ş
	APOLLO BEACH	FL	33572	73.2 73.2	ည တဲ	ا مسه
	City	State	Zip	ST 1	N	
Having been named as registered of place designated in this certificate, further agree to comply with the plan familiar with and accept the ob-	, I hereby accept the apporovisions of all statutes relibilizations of my position a	lating to the prossering to the prossering to the prossering age.	oper and complete performance of ent as provided for in Chapter 60 gnature (REQUIRED)	f my duties		

411.5 1:7

ARTICLE IV-

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

);

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager AMBR	CHRISTOPHER FREDERICK 146 STAR SHELL DRIVE			
	APOLLO BEACH, FL 33572			
				
(Use attachment if necessary)				
the date of filing.)	tific and cannot be more than five business days prior to or 90 days after et the applicable statutory filing requirements, this date will not be listed as			
ARTICLE VI: Other provisions, if any.				
REQUIRED SIGNATURE:				
This document is executed I am aware that any false in	ther or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.			

CHRISTOPHER FREDERICK

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)