





ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LEAD SENSE LIMITED LIABILITY COMPANY

(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:

5846 S. FLAMINGO RD #142  
FORT LAUDERDALE, FL 33330-3206

Mailing Address:

5846 S. FLAMINGO RD. #142  
FORTH LAUDERDALE, FL 33330-3206

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:

LAW OFFICES OF ADORNO-CUNILL & DAMAS P.L.  
Name

1000 BRICKELL AVE SUITE 1005  
Florida street address (P.O. Box **NOT** acceptable)

MIAMI                      FL                      33131  
City                      State                      Zip

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
16 JAN 25 PM 2:01

*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)

**ARTICLE IV-**

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

**Title:**  
"AMBR" = Authorized Member  
"MGR" = Manager  
MGR

**Name and Address:**

LEIF STEFFENSEN  
5846 S. FLAMINGO RD #142  
FORT LAUDERDALE, FL 33330-3206

AMBR

SAMIR YOUNES  
2600 S. OCEAN BLVD. APT 6C  
BOCA RATON, FL 33432

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 1-22-2016. (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.

ANY AND ALL LEGAL BUSINESS. THE OPERATING AGREEMNT DRAFTED 1-22-2016 CONTROLS ALL OPERATIONS OF THE LIMITED LIABILITY COMPANY.

**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.

Leif Steffensen  
\_\_\_\_\_

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)

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