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Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
TOTAL BOTTOM SOLUTIONS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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J. BRYAN

AUG - 3 2011

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TOTAL BOTTOM SOLUTIONS, LLC

(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:1720 S.W. 20th Street
Ft. Lauderdale, Florida 33315Mailing Address:

Same as principal address

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:

Effective Date 08/01/11

April Balentine

Name

1720 S.W. 20th Street

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

Ft. Lauderdale FL 33315

City, State, and 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 608, F.S.



 Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMApril Balentine1720 S.W. 20 StreetFt. Lauderdale, Florida 33315MGRJonathan H. Nomer1720 S.W. 20 StreetFt. Lauderdale, Florida 33315

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: August 1, 2011 (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.)

REQUIRED SIGNATURE:

X 

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

April Balentine, Managing Member

Typed or printed name of signer

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