- LOLOCO 3439 - Hubbs - 19960 Earlwood Diwe - Tipiter, Ha 32458

City/State/Zip

Phone #

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	,
(Corporation Name)	(Document #)
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(Corporation Name)	(Document #)
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☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	
will wait	Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit	AMENDMENTS Amendment
Limited Liability	Resignation of R.A., Officer/Director
Domestication	Change of Registered Agent Dissolution/Withdrawal
□ Other	Merger LO(-3439
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	
Fictitious Name	☐ Foreign
	Reinstatement
	Trademark
	Other
	*

CR2E031(7/97)

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Genesis ITB, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Coral Springs, Florida 33071-8172

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Darlehe A. Jordan

Name

11030 NW 3rd Court

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

Coral Springs FL 33071-8172

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..

Starte a . Signature

Registered Agent's Signature

Article-PV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested) Signature of a member or an authorized representative of a member.	OI MAR -5 P	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(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.) MARY B. PATRICK - Hubbs Typed or printed name of sizes.	M 5: 90	Ö
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Typed or printed name of signee

Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)