

# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

: (305)634-3694

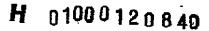
Fax Number : (305)633-9696

# LIMITED LIABILITY COMPANY

sb & associates, Ilc

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Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I

The name of the Limited Liability Company is:

SB & Associates, LLC

ARTICLE II Address

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

43 Castle Harbor Isle Fort Lauderdale, FL 33308

# ARTICLE III Registered Agent

The name and address of the limited liability company's registered agent is:

Andrew T. Gerrits, Esq. 6350 N. Andrews Avenue Ft. Lauderdale, Florida 33309.

#### ARTICLE IV Management

The Limited Liability Company is a manager-managed company. The name and address of the manager is:

Antonella Brancato
43 Castle Harbor Isle
Fort Lauderdale, FL 33308

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## Duration

The period of duration for the Limited Liability Company shall be:

perpetual

#### ARTICLE VI Admission of Additional Members

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Andrew T. Gerrits, authorized representative

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

Andrew T. Gerrits

Typed or Printed Name of Signee

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- The name of the limited liability company is:
- 2. The name and the Florida street address of the registered agent is:

ARY OF STATE ASSEE, FLORID

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 appointments 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.

Andrew T. Gerrite

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