



L020000004021

ACCOUNT NO. : 072100000032

REFERENCE : 108594 7307773

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 125.00

ORDER DATE : January 28, 2002

ORDER TIME : 7:57 AM

ORDER NO. : 108594-001

CUSTOMER NO: 7307773

900004961179--2

CUSTOMER: Mr. David B. Grife
Mr. David B. Grife

13205 Biscayne Island Terrace

North Miami, FL 33181

DOMESTIC FILING

NAME: SNS PERFORMANCE GROUP, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

02 FEB 20 PM 12: RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION

APPROVED
AND
FILED

JB
2-20-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SNS PERFORMANCE GROUP, LLC

ARTICLE II - Address:

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

13205 Biscayne Island Terrace, North Miami, Florida 33181

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

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

Alex Kurkin

Name

Pathman Lewis, P.A., 2 South Biscayne B

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

Miami

FL

33131

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.

Alex Kurkin

By: SEE ATTACHED

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

Deborah D Skipper

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.)

Deborah D. Skipper

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 20 PM 12:45

APPROVED
AND
FILED

MANAGING MEMBER OF SNS PERFORMANCE GROUP, LLC

David Ben Grife
Managing Member

13205 Biscayne Island Terrace
North Miami, Florida 33181

APPROVED
AND
FILED

02 FEB 20 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

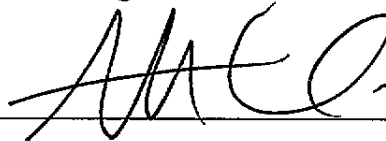
ACCEPTANCE OF REGISTERED AGENT
DESIGNATED IN THE ARTICLES OF INCORPORATION

ALEX KURKIN, an individual residing in this state, having a business office identical with the registered office of the corporation named below, and having been designated as the Registered Agent in the above and foregoing Articles of Incorporation of:

SNS PERFORMANCE GROUP, LLC

ALEX KURKIN is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

By: _____



Typed Name: ALEX KURKIN

dew

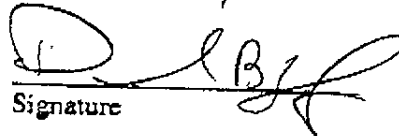
02 FEB 20 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of SNS PERFORMANCE GROUP, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 30 day of January 2002


Signature

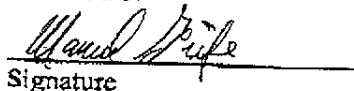
DAVID GRIFE
Print Name of Signer

WITNESS:


Signature

Stephanie Grife
Print Name of Witness

WITNESS:


Signature

Manuel Grife
Print Name of Witness

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 20 PM 12:45

APPROVED
AND
FILED