

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	: HUBCO
Account Number	: 104662003400
Phone	: (516)935-3940
Fax Number	: (516)935-3088

LIMITED LIABILITY COMPANY

C Sprite LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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PAGE 02 H02000069873

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: C SPRITE LLC

ARTICLE II - Address

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

74 North Lyme Street Fellesmere, FL 32948

ARTICLE III - Registered Agent, Registered Office & Registered Agent's signature The name and Florida street address of the registered agent are:

Diana Jasiorkowski

Name

74 North Lyme Street

(P.O. Box or Mail Drop Box NOT Acceptable)

Fellesmere, FL 32948

(City / State / 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.

Jasiorkowski Registered Agent's Signature - Diana

ARTICLE IV - 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

Signature of a member or 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.)

Diana Jasiorkowski

Typed or printed name of signee

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