

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

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To:

Division of Corporations

Fax Number : (850)205-0383

Account Name : PAUL SMITH Account Number : 120010000247 Phone Fax Number

: (305)673-0347 : (305)532-0738

LIMITED LIABILITY COMPANY

IT IMPULSE, LLC

Certificate of Status	0
Certified Copy	0
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ITImpulse, LLC

3055320738 (772)343-8890

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

NAME ARTICLE I

The name of the Limited Liability Company is:

ITIMPULSE, LLC

ARTICLE II <u>AUDRESS</u>

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

906 SW St Lucie West Blvd

Suite# 300

PORT ST. LUCIE, FL 34986

ARTICLE III REGISTERED AGENT. REGISTERED OFFICE &

REIGSTERED AGENT SIGNATURE

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

A1A Corporate Services Inc.

218 SOUTHERN COUNTRY LANE

QUINCY, FL 32351

Having been named as registered agent 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

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by onemember or more members and is, therefore, member - managed company.

ARTICLE V MEMBERS (optional)

Managing Member: ARIEL DIAZ

906 SW St Lucie West Blvd Suite#300 PORT ST. LUCIE, FL 34986

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ARTICLE VI

The liability of the members and managers of the LLC for monetary damages shall be eliminated to the fullest extent permissible under Florida law.

Nothing contained in these Articles of Organization shall limit or preclude the exercise of any right relating to indemnification or advancement of attorney's fees and expenses to any person who is or was a member or manager of the LLC.

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.

ARIEL DIAZ

Typed or printed name of signee