Division of Corporations 3 0000 (trps v ss1 collete) some self-elevative self-ele

Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

LIMITED LIABILITY COMPANY

BRANDI FUTURES, LLC.

RECEIVED
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\$155.00

103-9032

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BRANDI FUTURES, LLC

ARTICLE II - Address:

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

5789 S. UNIVERSITY DRIVE DAVIE, FL 33328

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

WILLIAM ENGEL

Name

5789 S. UNIVERSITY DRIVE
Florida street address (PO Box NOT acceptable)

DAVIE. FL 33328 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 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

ARTICLE IV - Management (Check box if applicable.)

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

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

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.)

WILLIAM ENGEL

Typed or printed name of signee