Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0363

: LLOYD GRANET Account Name Account Number : 074632001025 : (561)999-9300 Phone

: (561)999-9400 Fax Number

# LIMITED LIABILITY COMPANY

### TIDE INVESTMENTS LLC

Certificate of Status	1
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Estimated Charge	\$130.00

JIVISION OF CORPORATION

P# 3:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I

Name:

The name of the Limited Liability Company is:

TIDE INVESTMENTS LLC

#### ARTICLE II

Address:

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

11555 Heron Bay Boulevard Suite 300 Coral Springs FL 33076

## ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature:

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

Lloyd Granet, P.A.

2295 NW Corporate Boulevard
Suite 235

Boca Raton, FL 33431

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.

Lloyd Granet, P.A.

By:

Lloyd Granet, Registered Agent's Signature

Signature of a member or an authorized representative of a member.

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).

Lloyd Granet
Typed or printed name of signee