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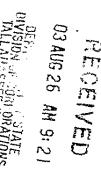
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COMPANY OF THE PROPERTY OF THE PROPERT



## CAPITAL CONNECTION, INC.

'417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
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Walk-In Will Pick Up	Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Fish Smart , LLC

ARTICLE II - Address:

The mailing address and sweet address of the principal office of the Limited fat

6887 W. 4th Ave. Hialeah, F1. 33014

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's S

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

Andrew H. Rappeport

1221 Kane Concourse

Floride street address (P.O. Box NOT agreentable) Bay Harbor Is,

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.,

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.

(An addition

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

(In accordance With section 608.408(3), Plonida Statutes, the execution of this doorment constitutes an affirmation under the penalties of perjury that the facta stated herein are true.)

Victoria Bonitto

Typed or printed name of signee

Filing Fresi

\$100.00 Filing Fee for Articles of Organization

5 25.00 Designation of Registered Agent .

5 30.00 Certified Copy (Optional)

\$ 5.90 Certificate of Status (Optional)