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→ **Attn: Tammy-New Filings**

To:

Division of Corporations
Fax Number : (850) 205-0383

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From:

Account Name : TRIPP SCOTT, P.A.
Account Number : 075350000065
Phone : (954) 525-7500
Fax Number : (954) 761-8475

LIMITED LIABILITY COMPANY

USCOOT, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION
OF
USCOOT, LLC**

The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

**ARTICLE I
NAME**

The name of this limited liability company is:

USCOOT, LLC

**ARTICLE II
PRINCIPAL OFFICE/MAILING ADDRESS**

The principal office of this limited liability company is:

3516 NE 12th Avenue
Oakland Park, FL 33334

The mailing address of this limited liability company is:

P.O. Box 24082
Oakland Park, FL 33307

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED
AGENT'S SIGNATURE**

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

Christine P. Yates, Esq.
c/o Tripp Scott, P.A.
110 SE 6th Street, 15th Floor
Fort Lauderdale, FL 33301

Prepared By: Christine P. Yates, Esq.
FL Bar No. 122653
Tripp Scott, PA
P. O. Box 14245
Ft. Lauderdale, FL 33302
(954) 525-7500

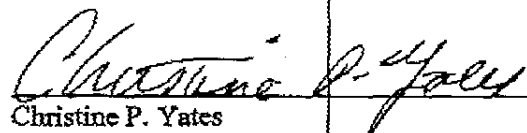
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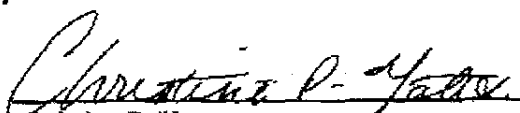
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.


Christine P. Yates
Registered Agent

ARTICLE IV
MANAGER(S) OR MANAGING MEMBER(S)

<u>Title</u>	<u>Name and Address</u>
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	William Harley 2889 NE 25 th Court Fort Lauderdale, FL 33305
MGRM	Michael Lawrance Boorom 2448 NE 27 th Terrace Fort Lauderdale, FL 33305

REQUIRED SIGNATURE:


Christine P. Yates
Authorized Representative of the Members

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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AND
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