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Florida Department of State
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To:

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

SURFTRAK, LLC

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

DIVISION OF CORPORATIONS

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

- Article 1: Name of the Limited Liability Company: **SURFTRAK, LLC**
- Article 2: Street Address and mailing address of Limited Liability Company: **2775 Sunny Isles Boulevard
Suite 100
Sunny Isles, FL 33160**
- Article 3: **REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:**
- Name: **Steve Sprechman, Esquire**
Address of the registered agent: **2775 Sunny Isles Boulevard
Suite 100
Miami, FL 33160**

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Having been named as registered agent and to accept service of process for the above state 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.

Signature of Registered Agent

Date: 11/26/09

- Article 4: 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.

By: Steve Sprechman, Esquire, 2775 Sunny Isles Blvd., Suite 100, Miami, FL 33160

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.)

Prepared By: **Carlos D. Lerman, Esquire**
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