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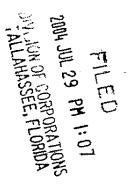
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Pro - fit Group, LLC (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Tami Jones		
(Name of Person)		
Pro-fit Group LLC (Pinn Company)		
(Pirm Company)		
17430 SW 54 Street		
(Address)		
Southwest Ranches, Fr. 33331 (City State and Zip Code)		
For further information concerning this matter, please call:		

Tami Jones at 954 732-9507
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Pro-fif Group LLC		
ARTICLE II - Address: The mailing address and street address of the principal Principal Office Address:		
17430 SW 54 Street Southwest Ranches, FL 33331	17430 SW 54 Street Southwest Ranches, FL 33331	

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

> Name
> 17430 SW 54 Street
> Florida street address (P.O. Box NOT acceptable) Southwest Ranches FLORIDA 33331
> 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, Florida Statutes..

Page 1 of 2 (CONTINUED)

	Member(s): Managing Member is as follows: Tame and Address: Tami Jones 17430 Sw 54 Street
ARTICLE IV- Manager(s) or Managing The name and address of each Manager or Ma	Member(s): Managing Member is as follows:
J	vialinging Melinoer is as follows.
Title: "MGR" = Manager	ame and Address:
"MGRM" = Managing Member	
MGRM	Tami Jones Box
	17430 SW 54 Street Southwest Ranches, FL 33331
	SULTHILLST MINCHES, PC 33951
The second secon	
-	toda vito determinanti
	, , , , , , , , , , , , , , , , , , ,
(Use attachment if necessary)	
NOTE: An additional article must be add	ded if an effective date is requested.
REQUIRED SIGNATURE:	า
Anni (Cont. 8
Signature of a member or an autho	rized representative of a member.
(In accordance with section 608.408	
of this document constitutes an affirm that the facts stated herein are true.)	nation under the penalties of perjury
Jami J. J	ones
REQUIRED SIGNATURE: Signature of a member or an author of this document constitutes an affirm that the facts stated herein are true.)	Trized representative of a member. (3), Florida Statutes, the execution nation under the penalties of perjury Ones

Filing Fees: \$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)