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2005 JUN 10 P 12: 54

SECRE	TARY OF STATE
(Requestor's Name) TALLAH	ASSEE, FLUR, MP 7
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(City/State/Zip/Phone #) PICK-UP WAIT MAIL	06/10/0501012001 ** 130.00
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TRANSMITTAL LETTER

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TO:

Registration Section Division of Corporations

2005 JUN 10 P 12: 54 SUBJECT: SMK MANAGEMENT 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: SCOTT KROLL (Name of Person) (Firm/Company) 410 N. FEDERAL HWY #119 (Address) DEERFIELD BEACH FL 33441 (City/State and Zip Code) For further information concerning this matter, please call: SCOTT KROLL at (561) 251-3747 (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$125.00 Filing Fee **Z** \$130.00 Filing Fee & 1 \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

STREET ADDRESS:

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

(additional copy is enclosed)

Certified Copy

(additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name: The name of the Limited Liability Company is:	2005 JUN 10 P 12: 51 SECRETARY OF STATE TALLAHASSEE, FLORID	
SMK MANAGEMENT LLC		
ARTICLE II - Address:		
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
410 N. FEDERAL HWY #119	410 N. FEDERAL HWY #119	
DEERFIELD BEACH FL 33441	DEERFIELD BEACH FL 33441	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the respective o		
Name		

33441

Florida street address (P.O. Box NOT acceptable)

City, State, and Zip

410 N. FEDERAL HWY #119

DEERFIELD BEACH

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..

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	FILED
"MGRM" = Managing Member		2005 JUN 10 P 12: 54
MGRM	SCOTT KROLL 410 N. FEDERAL HWY #119 DEERFIELD BEACH FL 33441	SECRETARY OF STATE TALLAHASSEE, FLORIDA
		······································
(Use attachment if necessary)		
NOTE: An additional article mus REQUIRED SIGNATURE:	t be added if an effective date is	requested.
Signature of a memb	wer or an authorized representative of a	mambar
(In accordance with se	ection 608.408(3), Florida Statutes, the extitutes an affirmation under the penalties	recution

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

SCOTT KROLL

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee