Division of Corporations Public Access System

# Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name

: AGENTS AND CORPORATIONS, INC

Account Number : I20010000112

Phone : (302) 575-0875

Fax Number

: (302)575-0925

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<b>FLORI</b>	DA/FOREIGN LIM	TED LIABILIT	Y CO.
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: Team Transactions, LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 5944 Coral Ridge Dr., #306, Coral Springs, FL 33076.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Agents and Corporations, Inc. Sulte E, 773 4th Avenue North Naples, FL 34102

Having been name 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. みしん ue

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable.) [ ] The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager - managed company.

ARTICLE V - Manager:

The initial Manager(s) of the Limited Liability Company shall be:

Deborah Moquin

Signature of a member or an authorized representative of a member (in accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Mour

Deborat: Moquin Typed or printed name of signee