

Division of Corporations

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Florida Department of State

Division of Corporations

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

From: Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**TIS INVESTMENTS LLC**

Certificate of Status	0
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**DB**

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED  
LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

TIS INVESTMENTS LLC

**ARTICLE II ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

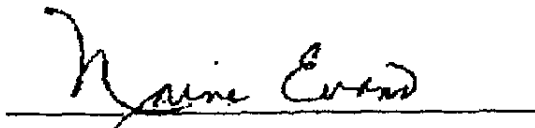
1287 BEACON CIRCLE  
WELLINGTON FL 33414

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED  
AGENT SIGNATURE**

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

NORINE EVANS  
2324 S CONGRESS AVE SUITE 2F  
PALM BEACH FL 33406

Having been named as registered agent 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



NORINE EVANS / Registered Agent's Signature

**ARTICLE IV MANAGEMENT**

The Limited Liability Company will be managed by one or more managing members and is, therefore, a Member Managed Company.

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**ARTICLE V**

The name(s) and address(es) of the managing members of the LLC are:

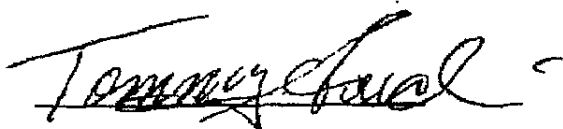
MANAGING MEMBER: TOMMY SARDINE  
1287 BEACON CIRCLE  
WELLINGTON FL 33414

MANAGING MEMBER: NATHANIEL SARDINE  
1287 BEACON CIRCLE  
WELLINGTON FL 33414

MANAGING MEMBER: INGRID SARDINE  
1287 BEACON CIRCLE  
WELLINGTON FL 33414

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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.)

TOMMY SARDINE  
Typed or printed name of signee

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