Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

: INCORPORATING SERVICES FL. Account Name

Account Number: I20050000052

: (302)531-0855 Phone

Fax Number

(302)531-3150

8- 10	ORIDA/FOREIGN LIMITED LIABILITY CO. Traffic MIA LLC			
O6 SEP DIVISION	Certificate of Status	0		
90	Certified Copy	0		
المها	Page Count	02		
	Estimated Charge	\$125.00		

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	· ·	
Traffic MIA LLC (Must end with the words "Limited Liability Company, "Limit	ted Company" or their abbreviation "LLC," or "L.C.")	
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
7800 Collins Avenue	7800 Collins Avenue	
Suite 505	Suite 505	2004
Miami, FL 33141	Miami, FL 33141	₽ĸ
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registration and with an active Plorida registration.)	d Office, & Registered Agent's Signature: stated Agent. You must designate an individual or mother	CHETARY AHASSEE
The name and the Florida street address of the	registered agent are:	고유
Greg Lewis	<u></u>	STAFF
7800 Collins Avenu	e Suite 505	

FL 33141 Ciry, 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 statides 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..

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

ature (REQUIRED)

Miami Beach

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Incorporating Services. No. 4394 P. 3 Sep. 18. 2006 9:44AM ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" - Manager "MGRM" = Managing Member **MGRM Greg Lewis** 7800 Collins Avenue, Suite 505 Mlami Beach, FL 33141 MGRM Mark Bolkovich 77 Bleecker Street, Apt. 333 New York, NY 10012 (Use attachment if necessary) (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or an Enchorized representative of a member. (In secondance with section 608.406(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of parjury that the facts stated herein are true.) Typed or printed name of signee Filing Fees:

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\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent \$ 30,00 Certified Copy (Optional) \$ 5,00 Certificate of Status (Optional)

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