# MAR-05-200 MON 09:11 A Florida Department of State

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### FLORIDA/FOREIGN LIMITED LIABILITY CO.

IS TAMPA, LLC

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#### ARTICLES OF ORGANIZATION OF IS TAMPA, LLC

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes.

#### ARTICLE I NAME

The name of this limited liability company is IS TAMPA, LLC (the "Company")

### ARTICLE II ADDRESS

is 2090 NW 94<sup>th</sup> Way, Sunrise, Florida 33322. West to 1000 NW 94<sup>th</sup> Way, Sunrise, Florida 33322.

### ARTICLE III REGISTERED AGENT AND OFFICE

The name and address of the initial registered agent of the Company is Savitri Harnarrine, 2090 NW 94<sup>th</sup> Way, Sunrise, Florida 33322.

### ARTICLE IV MANAGEMENT

The Company shall be a Member-Managed entity and the initial managing member is:

Savitri Harnarrine 2090 NW 94th Way Sunrise, Florida 33322

The undersigned executed these Articles of Organization on this 2007.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Savitri Hamarrine, Member

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SECRETARY OF STATE
TALL AHASSEF FLORIDA

FILED

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

#### IS TAMPA, LLC

2. The name and the Florida address of the registered agent are:

Savitri Harnarrine 2090 NW 94th Way Sunrise, Florida 33322

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.

Savitri Hamarrine

SECRETARY OF STATE TALLAHASSEE, FLORIDA