Division of Corporations 1000 12125 of 1

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088 07 NOV -7 AH 8: 0
SECRETARY OF STAT

FLORIDA/FOREIGN LIMITED LIABILITY CO.

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SECRETARY OF STATE

FALLAHASSEE, FLORIDA

Technology Innovations International LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Technology Innovations International LLC

ARTICLE II - Address

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

Principal Office Address:	Mailing Address:	
2901 Stirling Road - Suite 307	2901 Stirling Road - Suite 307	
Fort Lauderdale, FL 33312	Fort Lauderdale, FL 33312	
ARTICLE III - Registered Age The name and Florida street address of	nt, Registered Office & Registered Agent's Signa	
The fiding and I lotter above address or	Harry M. Samuels	07 NOV -7 1 SECRETARY CALLAHASSEE
	Name	AH.
	2901 Stirling Road - Suite 307	AR ARS
	(P.O. Box of Mail Drop Box NOT Acceptable)	
	•	
	Fort Lauderdale, FL 33312 (City / State / Zlp)	FLORN

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 - Harry M. Samuels

ARTICLE IV - Manager(s) or The name and address of each Manager	Managing Member(s): ger or Managing Member is as follows:	700027	4606	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	Harry M. Samuels - 2901 Stirling Rd Suite 307, Fort Lauderds	ile, FL 3	3312	·
(Use attachment if necessary)				
REQUIRED SIGNATURE:	Hauf manue			
(In accordan	of a member or authorized representative of a member. ce with section 608.408(3), Florida Statutes, the execution of this astitutes an affirmation under the penalties of perjury that the facts are true.)			
	Harry M. Samuels	→ .	_	
·	Typed or printed name of signee	SECRETARY OF STATE ALLAHASSEE FLORIDA	07 NOV -7 AH 8: 08	