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LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time _ Certified Copy Walk in Will_wait ... Mail out ☐ Photocopy Certificate of Status **NEW FILINGS** <u>AMENDMENTS</u> Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:						
South FloriDA Advertising NETWORK, LLC						
(Must end with the words "Limited Liability Company, "L.L.C.," or "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:						
4150 NW 7th 5t 207 Ste 207 NAMI, FC 33126 35 25 36 36 36 36 36 36 36 36 36 36 36 36 36						
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)						
The name and the Florida street address of the registered agent are:						
HUGO HARTINEZ EFFECTIVE DATE						
Name						
575 SW 84 AVE						
Florida street address (P.O. Box NOT acceptable)						
City, 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						

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 (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:						
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	, oer	Name and Add	ress:			
MGRM		Julio	MOREJON,			

MGRM MGRM

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 11-15-2007. (OPTIONAL) (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 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.)

MARTINEZ

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)