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Division of Corporations Public Access System

# Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA/FOREIGN LIMITED LIABILITY\_CO.

STRATEGIC MITIGATION GROUP, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is: STRATEGIC MITIGATION GROUP, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 407 Lincoln Road, Suite 300, Miami Beach, Fl 33139

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

## George L. Brito Name

407 Lincoln Road, Suite 300 Florida Street address (P.O. Box NOT acceptable)

> Mismi Beach, Fl 33139 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 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.

Rogistered Agest's Signature

ARTICLE IV - Management (Check box if applicable)

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager – managed company.

(An additional Article must be added if an effective date is requested)

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.)

Bill Davis or printed name of signee

ignature of a member or an authorized representative of a member

ECRETARY OF STATE

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

<u> Lori Davis</u>

Typed or printed name of signee

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.)

Typed or printed name of signee

SECRETARY OF STATE