

LO8000047614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

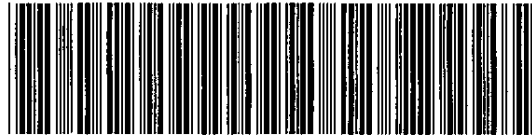
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
08 MAY 12 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N. Gulligan MAY 13 2008

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

Spyke Investments, LLC

Enclosed is the original and one copy of the Articles and a check in the amount of 125.00 which represents the filing fee for a Limited Liability Company. Please return the enclosed additional copies to me with the filing date stamped on it.

FROM Strategic Corporate Services Plus, Inc.

849 East Aultman Street

Ely, NV 89301

1-866-310-7269  
( Telephone)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Spyke Investments, 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:

6297 Crescent Lake Way  
Lake Worth, FL 33463

#### Mailing Address:

6297 Crescent Lake Way  
Lake Worth, FL 33463

### 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:

Rohan S. Spyke

Name

6297 Crescent Lake Way

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

Lake Worth FL 33463

City, State, and Zip

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TALLAHASSEE FLORIDA

*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..*

Rohan Spyke  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

