Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

INSPIRED GENTUSES, LLC.

| Certificate of Status | . 0 |
|-----------------------|----------|
| Certified Copy | 1 |
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J. BRYAN

NOV 9 4 2008

EXAMINER

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | Geniuses, Llc. |
|---|---|
| (Must and with the words "Limited Liability | Geniuses, LLC. |
| (Must and with the words "Limited Linbility | Company, "L.L.C.," of "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the prin | o de la companya de |
| Principal Office Address: | Mailing Address: |
| -7333 Miami Lakes Drive 14670 Miami Lakes, Fl 33014 | 7333 Miami Lakes Drive H1070 Miami Lakes, Fl 33014 |
| ARTICLE III - Registered Agent, Registered C (The Limited Liability Company cannot serve as its own Registered business outity with an active Florida registration.) | Office, & Registered Agent's Signature: ad Agent. You must designate an individual or another |
| The name and the Florida street address of the reg | ristered agent are: |
| Janet Mai | rti |
| | ss (P.O. Box <u>NOT</u> acceptable) |
| Miami Lakes City, State, and | PL 33019 1 Zip |
| liability company at the place designated in this registered agent and agree to act in this capacity. | arti |

(CONTINUED)
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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|---|---|
| <u>HGR</u> | Tanet Marti 7333 Miami lanes Drive Hora Miami lanes, Fl 33014 |
| HGR | Susana Marti-Perce 7333 Miami Loures Drive #1 Miami Lanes, Fi 33014 |
| | |
| | |
| (Use attachment if necessary) | |
| LEV: Effective date, if other the | nan the date of filing: (OPTION and cannot be more than five business day |
| LEV: Effective date, if other the frective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: | nust be specific and cannot be more than five business day |
| LEV: Effective date, if other the ffective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Signature of a | member or an authorized representative of a member. |
| LEV: Effective date, if other the ffective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume) | member or an authorized representative of a member. |
| LEV: Effective date, if other the ffective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this docume) | member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.) |

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\$ 5.00 Certificate of Status (Optional)

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