## Florida Department of State

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

COMPLY IT, LLC

Certificate of Status	0
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S. HAWKES

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## ARTICLES OF ORGANIZATION OF COMPLY IT, LLC



ARTICLE I

NAME

The name of the limited liability company shall be: COMPLY IT, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 12595 S.W. 137th Ave, Suite 301, Miami Florida 33186.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Howard N. Galbut, P.A., 2650 Biscayne Boulevard, Miami. Florida 33137. Located in the County of Miam-Dade.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2045.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Andrew Toback 12595 S.W. 137th Ave., Suite 301, Miami, Florida 33186. Audrey Levi 12595 S.W. 137th Ave., Suite 301, Miami, Florida 33186.

Andrew Toback, Incorporated, Organizer

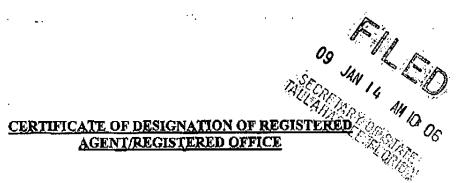
Prepared by Andrew Toback,

12595 S.W. 137th Ave. Suite 301

Miami, Florida 33186

(786) 295-0464

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PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: COMPLY IT, LLC.

The name and address of the registered agent and office is HOWARD N. GALBUT, P.A., 2650 Biscayne Boulevard, Second Floor, Miami, Florida 33137. Located in the County of Miami-Dade.

Having been named as Registered Agent and to accept service of process for the above stated 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.

Signature:

Dated:

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