09000012246

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Δ. | ldress) | |
| (^0 | iuiess) | |
| (Ac | ldress) | |
| | | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| | | - |
| (Br | isiness Entity Nan | ne) |
| (Do | ocument Number) | |
| | | |
| Certified Copies | _ Certificates | or Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



300158828453

TALLAHASSEE, FLORIDA

FILED



AM II: 08

M. THOMAS

JUL 28 2009

EXAMINER



ACCOUNT NO. : I2000000195 REFERENCE: 078682 4322747 AUTHORIZATION : COST LIMIT : ORDER DATE: July 27, 2009 ORDER TIME : 8:56 AM ORDER NO. : 078682-005 CUSTOMER NO: 4322747 DOMESTIC FILING NAME: BEYOND THE SEAT, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX_ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Joyce Markley - EXT. 2930

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company | / is: |
|---|--|
| BEYOND THE SEAT, LLC | |
| (Must end with the words "Limited I | Liability Company, "L.L.C.," or "LLC.") |
| ARTICLE II - Address: The mailing address and street address of the | e principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 7111 Mandarin Drive | 7111 Mandarin Drive |
| Boca Raton, Florida 33433 | Boca Raton, Florida 33433 |
| | Boca Raton, Florida 33433 ered Office, & Registered Agent's Signature. Registered Agent. You must designate an individual or another the registered agent are: |
| | ame Sign S |
| 7111 Mandarin Driv Florida stree | et address (P.O. Box <u>NOT</u> acceptable) |
| Boca Raton City, St | FL 33433 ale, and Zip |
| Having heen named as registered agent and | to accent service of process for the above stated limited |

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)

(CONTINUED)
Page 1 of 2

| <u>Title:</u> "MGR" = Manage "MGRM" = Mana | | Name and Address: | | |
|---|---|--|--|----|
| MGRM | _ | Matt Rosenblatt 7111 Mandarin Drive Boca Raton, Florida 33433 | | |
| | | | | |
| | _ | | | |
| | late, if other than the date ed, the date must be sp | e of filing: (ecific and cannot be more than five bu | TASE SE S | or |
| to or 90 days after the da <u>REQUIRED</u> SIC | | | using STATE AND STATE STATE FLORIDA | |
| | Signature of a member or | an authorized representative of a member. | | |
| | (In accordance with section of this document constitute that the facts stated herei | 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.) | | |
| | Matt Rosenblatt | | | |
| | Typed | or printed name of signee | | |
| Filing Fees: | | | | |
| of Regis | ee for Articles of Organiza stered Agent d Copy (Optional) | tion and Designation | | |

\$ 5.00 Certificate of Status (Optional)