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TO:

Registration Section

Division of Corporations

Jason Daniels

Bridge Marketing Solutions, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jason Daniels Name of Person Innovestment Solutions, LLC Finn/Company 6470 Terraza Portico Address Carlsbad, CA 92009 City/State and Zip Code iason.e.daniels@gmail.com E-mail address: (to be used for future annual report southeaton) For further information concerning this matter, please call: **618-3604** Paul LiCausi

Enclosed is a check for the following amount:

Name of Person

Certificate of Status

\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Struct/Coarier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301

Area Code & Daytime Telephone Number

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Bridge Market (Must end with the words "Limited Liability	eting Solutions, LLC by Company," "L.L.C.," or "LLC."
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6470 Terraza Portivo Carisbad, CA 92009	6470 Terraza Portico Carlsbad, CA 92009
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	
Paul Li Ca Name	JAN -4
2704 Sevenit Florida street address (P.O.	V CICLEN. Box NOT acceptable)
Fort Pierce City, State, an	FL 34981 S AP
Uming hose named as registered agent and to a	recent gamine of presence 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

ARTICLE IV- Manager(s) or Managing Member(s):

<u>Fitle:</u> "MGR" = Mana "MGRM" = Ma	ger naging Member	Name and Address:
MGRM		Jason Daniels 6470 Terraza Portico Carisbad, (A 92009
MGRM		Manna Holding Company, LL 2704 Serenity Circle North Fg. Pierce, FL 34981
(Use attachment	t if necessary)	
LE V: Effective fective date is li	e date, if other than the	e date of filing: (OPTIONA be specific and cannot be more than five business da
LE V: Effective fective date is li days after the d	e date, if other than the isted, the date must be date of filing.) IGNATURE:	be specific and cannot be more than five business da
LE V: Effective	e date, if other than the isted, the date must be date of filing.) IGNATURE: Signature of a memb	be specific and cannot be more than five business da
LE V: Effective fective date is li days after the d	e date, if other than the isted, the date must be late of filing.) IGNATURE: Signature of a memb of this document con that the facts stated here.	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)