Florida Department of State Division of Corporations

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Empil Addyoga:			

FLORIDA LIMITED LIABILITY CO. SAVVY WATCHES, LLC

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JAN 11 AM 8-21

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ARTICLES OF ORGANIZATION

SAVVY WATCHES, LLC a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

SAVVY WATCHES, LLC

ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

One South School Ave., Sulte 500 Sarasota, Florida 34237

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Gregory S. Band One South School Ave., Suite 500 Sarasota, Florida 34237

ARTICLE IV EFFECTIVE DATE

The effective date of filing of these Articles of Organization is January 10, 2011.

Audit# (((H11000009198 3)))

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ARTICLE V MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations or Operating Agreement of the Limited Liability Company.

By; _________Gregory S. Band

"Authorized Representative"

Audil# (((H11000009198 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

SAVVY WATCHES, LLC

2. The name and the Florida street address of the registered agent is:

Gregory S. Band One South School Ave., Suite 500 Sarasota, Florida 34237

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Зу: _____

"REGISTERED AGENT"

SECRETARY OF STATE OF WISHON OF CORPORATIONS