

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
International Business Initiatives LLC**

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$125.00

C. LEWIS

MAR 30 2011

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:
International Business Initiatives LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 4288 SW 185th Ave., Miramar, FL 33029

Mailing Address: 4288 SW 185th Ave., Miramar, FL 33029

ARTICLE III - Registered Agent**Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Joseph G. Farkas
4288 SW 185th Ave.
Miramar, FL 33029

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
Joseph G. Farkas

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

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
<u>MGRM Joseph G. Farkas</u>	<u>4288 SW 185th Ave., Miramar, FL 33029</u>
<u>MGRM Brenda J. Farkas</u>	<u>4288 SW 185th Ave., Miramar, FL 33029</u>

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Joseph G. Farkas, Organizer
Typed or printed name of signer