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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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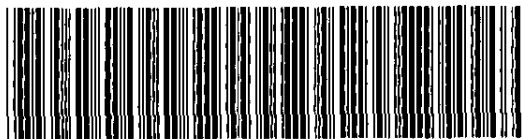
(Business Entity Name)

(Document Number)

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11 MAY 24 PM 1:52

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

11 MAY 24 PM 4:40

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

B. KOHR

MAY 24 2011

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-14**

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
11 MAY 24 PM 4:40

**CONTACT:** RICKY SOTO

**DATE:** 05/24/2011

**REF. #:** 000928.148562

**CORP. NAME:** EL-AD ASSET MANAGEMENT LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

**STATE FEES PREPAID WITH CHECK#** 539911 **FOR \$** 155.00

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

\_\_\_\_\_ **COST LIMIT: \$** \_\_\_\_\_

**PLEASE RETURN:**

- ☒ CERTIFIED COPY      ☐ CERTIFICATE OF GOOD STANDING      ☐ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

Examiner's Initials

**ARTICLES OF ORGANIZATION  
OF  
EL-AD ASSET MANAGEMENT LLC**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAY 24 PM 4:40

These Articles of Organization of EL-AD ASSET MANAGEMENT LLC have been duly executed and are being filed by the undersigned authorized representative of a member to form a Florida limited liability company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608) as follows:

**ARTICLE I  
NAME**

The name of the limited liability company formed hereby is EL-AD ASSET MANAGEMENT LLC (the "Company").


**ARTICLE II  
ADDRESS**

The principal place of business address and mailing address of the Company is 1301 International Parkway, Suite 200, Sunrise, Florida 33323.

**ARTICLE III  
REGISTERED AGENT AND REGISTERED OFFICE**

The name and the Florida street address of the registered agent and registered office of the Company is NRAI Services, Inc., 515 East Park Avenue, Tallahassee, Florida 32301.

IN WITNESS WHEREOF, the undersigned executed these Articles of Organization on the 24 day of May, 2011.

By:   
Michael A. Berke, Esq.  
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).

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT AND REGISTERED OFFICE**


PURSUANT TO THE PROVISIONS OF SECTION 608.415 OF THE FLORIDA STATUTES, EL-AD ASSET MANAGEMENT LLC SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA.

- (1) The name of the limited liability company is EL-AD ASSET MANAGEMENT LLC.
- (2) The name and street address of the Florida registered agent and office are:

NRAI Services, Inc.  
515 East Park Avenue  
Tallahassee, Florida 32301

*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 the 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 in Chapter 608, F.S.*

NRAI SERVICES, INC.

By:   
Name: Angela Pawlinski  
Title: Asst. Secretary  
Date: May 24 2011