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FLORIDA LIMITED LIABILITY CO.  
S.S.F., LLC

Certificate of Status	0
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EXAMINER

7/29/2011

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**OF  
S.S.F., LLC**

**ARTICLE I.**

**NAME**

The name of the Limited Liability Company is:

**S.S.F., LLC**

**ARTICLE II.**

**ADDRESS OF PRINCIPAL OFFICE IN THIS STATE**

The initial street and mailing address of the principal office of this Limited Liability Company in the State of Florida is:

**1571 NW 98th Terrace  
Pembroke Pines, FL 33024**

**ARTICLE III.**

**NAME OF REGISTERED AGENT, REGISTERED OFFICE, AND**

**REGISTERED AGENT'S SIGNATURE**

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

**David M. PORRIS  
1571 NW 98th Terrace  
Pembroke Pines, FL 33024**

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

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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.

  
David M. PORRIS, Registered Agent

7/29/2011  
Date

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ARTICLE IV.  
MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ARTICLE V.  
INITIAL MANAGER(S)

The name(s) and address(es) of initial Manager(s) is(are):

David M. PORRIS  
1571 NW 98th Terrace, Pembroke Pines, FL 33024

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In accordance with Section 608.403(3), Florida Statutes, the execution of this document constitutes and affirmation under the penalties of perjury that the facts stated here are true.

  
\_\_\_\_\_  
David M. PORRIS, Manager

7/29/2011  
\_\_\_\_\_  
Date