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Division of Corporations

Fax Number : (850) 617-6383

Susan Barch

Account Name : AKERMAN SENTERFITT (ORLANDO)

Account Number : 076656002425

Fax Number

: (407)423-4000 : (407) 04:1-6610-

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Email Address: susan.barch@akerman.com

FLORIDA LIMITED LIABILITY CO. FLOORFORCE, LLC

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D. BRUCE

AUG 1 2 2011

EXAMINER

ARTICLES OF ORGANIZATION OF FLOORFORCE, LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida does set forth the following:

- 1. NAME. The name of the Limited Liability Company is FLOORFORCE, LLC (the "Company").
- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 5455 N. Federal Highway, Suite O. Boca Raton, Florida 33487.
- 3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Accounting and Business Consultants, LLC, 2962 Trivium Gircle, Suite 101, Fort Lauderdale, Florida 33312.

The undersigned has executed these Articles of Organization on the 10th day of Allgust, 2011.

By:

Authorized Representative

<u>CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE</u>

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: FLOORFORCE, LLC.
- 2. The name and address of the registered agent and office is:

Accounting and Business Consultants, LLC 2962 Trivium Circle Suite 101
Fort Lauderdale, Florida 33312.

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 its 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.

ACCOUNTING & BUSINESS CONSULTANTS, LLC

Ву:	Mitted six Wing	Date: August 10, 2011
	Sheway Han Woog	
Title: _	Managing Member	