

Nov 04 2011 1:20PM

HE LASERJET FAX

L11000126448

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000263720 3)))



H110002637203ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

2011 NOV -4 PM 1:20 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED

11 NOV -4 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

Rage Pulse, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

A. LUNT

NOV -7 2011

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H11000263720 3

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

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

RAGE PULSE, LLC

ARTICLE II ADDRESS

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

2627 NE 203RD STREET, STE 118
AVENTURA, FLORIDA 33180

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

WILLIAM J SEGAL
20801 BISCAYNE BOULEVARD, STE 304
AVENTURA, FLORIDA 33180

Having been named as registered agent 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.

X 
WILLIAM J SEGAL Registered Agent's signature

H11000263720 3

2011 NOV -4 PM 1:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H11000263720 3

PAGE 2 RAGE PULSE, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more manager and is, therefore, a Manager Managed Company.

ARTICLE V MANAGERS

MANAGER

ROLAND FAITH

2627 NE 203RD STREET, STE 118

AVENTURA, FLORIDA 33180

MANAGER

AARON GURLAND

490 SAWGRASS CORPORATE PARKWAY

SUNRISE, FLORIDA 33325

FILED
2011 NOV -4 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

.....
X

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.

ROLAND FAITH

H11000263720 3