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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies		
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Effective Date 02/27/12

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SECRETARY OF STATE SECRETARY OF STATE O

J. BRYAN

MAR - 2 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Smart Dynamic LLC				
Name of Limited	Liability Comp	any		
The enclosed Articles of Organization and fee(s) are su	bmitted for filin	g.		
Please return all correspondence concerning this matter	to the following	g :		
Monica Manzi				
	lame of Person			
	Firm/Company			
1617 S Federal Highway # 1	80		·	
	Address		DIZE SEC	П
Pompano Beach,Fl 33062			AET 第	
·	State and Zip Code	e	SS SS	11
smartdynamic@yahoo.com E-mail address: (to be used for	future annual rem	art notification	متنس استان	_
·		or nouncation	1:25 STATE FLORIE	
For further information concerning this matter, please of	au.		A S	
	_{at (} 954	684-399		
Name of Person	Area Code	e & Daytime T	elephone Number	
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$\sum \text{\$\sum \$\sum \$\sum \$\sum \text{\$\sum \$\sum \$\text{\$\text{certificate of Status}}}\$	\$155.00 Filir Certified Co (additional cop.	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton E 2661 Exc	purier Addression Section of Corporation Stullding secutive Centers FL 3230	ons er Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Smart Dynamic LLC (Must end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")
	Effective Date $02/27//2$
ARTICLE II - Address:	, ,
The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1617 S Federal Highway # 108	1617 S Federal Highway # 108
Pompano Beach,Fl 33062	Pompano Beach,Fl 33062
business entity with an active Florida registration.)	7.00
The name and the Florida street address Monica Manzi	7.0 2
The name and the Florida street address	7.0 2
The name and the Florida street address Monica Manzi	7.0 2
The name and the Florida street address Monica Manzi 1617 S Fed	Name Name
The name and the Florida street address Monica Manzi 1617 S Fed	Name eral Highway # 108 street address (P.O. Box NOT acceptable)
The name and the Florida street address Monica Manzi 1617 S Fed Florida	Name eral Highway # 108 street address (P.O. Box NOT acceptable)

(CQNTINUED)

ture (REQUIRED)

Page 1 of 2

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: "MGR" = Manager "MGRM" = Managing Member Monica Manzi 1617 S Federal Highway # 108 Pompano Beach,FI 33062 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filling: February 27,2012 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE**

Signature of a member of an authorized representative of a member.

(In accordance with section 603.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Monica Manzi

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)