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STEARNS WEAVER MILLER

2001/0003

Division of Corporations

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FLORIDA LIMITED LIABILITY CO.
GOT INJURED? LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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MAY 15 2012

EXAMINER

**ARTICLES OF ORGANIZATION OF
GOT INJURED? LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, as amended, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company is Got Injured? LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 1250 South Pine Island Road, Suite 225, Plantation, Florida 33324.

ARTICLE III - DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV - REGISTERED OFFICE AND AGENT AND ADDRESS

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

Name

Address

Eric Ellsley

1250 South Pine Island Road
Suite 225
Plantation, Florida 33324

IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of Organization for the foregoing uses and purposes this 10th day of May 2012.



Scott Sobol,
Authorized Representative

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STEARNS WEAVER MILLER

0003/0003

REGISTERED AGENT'S ACCEPTANCE

Having been named as registered agent and to accept service of process for Got Injured? LLC at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 608, Florida Statutes.

Dated: May 10th, 2012.


Eric Ellsley, Registered Agent