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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

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

Email Address: brosterboarder@gnail com

FLORIDA LIMITED LIABILITY CO.

Booster Board LLC

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DIVISION OF CORPORATIONS

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ARTICLES OF ORGANIZATION OF Booster Board LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Booster Board LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 202 concert Ct, Freeport, Florida 32439.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual,

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the managing members and the name and address of the member of the Limited Liability Company is:

Ryan DeVore, PO Box 4651, Santa Rosa Beach, Florida 32459

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

WI 53717

608-827-5300

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SECRETARY OF STATE VISION OF CHREGATIONS

Date: September 26, 2012

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

The name of the limited liability company is: Booster Board LLC

The name and address of the registered agent and office is Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Mark Williams, A.V.P. Business Filings Incorporated

Date: September 26, 2012

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