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SECRETARY OF STATE DIVISION OF COMPORATIONS

AUG 1 6 2013

T. HAMPTO!!

: (850) 245-6051...

COVER LETTER TO: **Registration Section** Division of Corporations Life Systems Group, LLC Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Don Alcala Name of Person Life Systems Group, LLC Firm/Company 7303 124th Avenue Address Largo, Florida, 33773 City/State and Zip Code dalcala@i-ma.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 727 <u>548-4462 x 124</u> Don Alcala Name of Person Enclosed is a check for the following amount: **■**\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Life Systems Group, LLC			
(Must end with the words "Lin	ited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the principal office of the Limited Liability Company			
Principal Office Address:	Mailing Address:		
7303 124th Avenue	7303 124th Avenue		
	7303 124th Avenue Largo, Florida 33773		
7303 124th Avenue Largo, Florida 33773			
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another		
Largo, Florida 33773 ARTICLE III - Registered Agent, Re	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another		
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another		
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ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Don Alcala 7303 124th Avenue	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:		
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Don Alcala 7303 124th Avenue Florida	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are: Name		

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 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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

DIVISION OF CEAPOR ATIONS

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Matthew Scussel
	412 Timberwalk Lane
	Lake Mary, Florida 32746
MGRM	William Funk
	1298 Snell Isle Blvd NE
	St. Petersburg, Florida 33704
MGRM	Chris Thomas
	2613 Cottage Loop Road
	Park City, Utah 84098
	
Use attachment if necessary)	
EV: Effective date, if other than	the date of filing: (OPTIO)

REQUIRED SIGNATURE:

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. 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.)

DON ALCALA

Typed or printed name of signer

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)

DIVISION OF CORPORATION OF