12/18/2031 0

# Division of Corpora **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.

(((H14000026572 3)))



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

Effective Date 2314

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I2000000019

Phone

: (305)552-5973

Fax Number

: (305)220-1440

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

Email Address:

#### FLORIDA LIMITED LIABILITY CO. ePOWER 360 LLC

Certificate of Status	1		
Certified Copy	0		
Page Count	03		
Estimated Charge	\$130.00		

Corporate Filing Menu

Help

FEB - 6 2013

T. HAMPTON

#6297 P. 002/003

## H14000026572

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	*****	•	
ARTICLE I - Name: The name of the Limited Liability Company is:	,		
CRUER 360 LLC (Must end with the words "Limited Liability Company, the abbreviation "L.L.C.," or the designation "LLC.")	<del></del>		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Co	тралу і	is:	
Principal Office Address:  6800 SW 40 STREET #473 Sawe MIAMI, FL 33156-3708		- -	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatus (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Plorida registration.)	re; er		
The name and the Florida street address of the registered agent are:			
SAIED HUSSAINI Name			
6800 SW 40 STRUET #4 Florida street address (P.O. Box NOT acceptable)	73		
Many FL 33155 City, State, and Zip			
Having been named as registered agent and to accept service of process for the above state company at the place designated in this certificate, I hereby accept the appointment as registere to act in this capacity. I further agree to comply with the provisions of all statutes reproper and complete performance of my duties, and cam familiar with and accept the oblig position as registered agent as provided for in Chapter, 605 F.S.  Registered Agent's Signature (REQUIRED)	stered at lating to	gent an the	
(CONTINUED)	SECRE TALLA	2014 FEB -5	<b>—</b>
Page 1 of 2	RETARY AHASSE	:B -5	

## M14000026572

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manag	er	Name and Address:	
#MGRM" = Man	aging Member —	BAIED HUSE BROD SWI 40 MS MIAMI, FLORIS	AIN] 34. #473
	<del></del>		
	<del></del>		
		-	
ARTICLE V: Effective (If an effective date is li to or 90 days after the d REQUIRED SI	sted, the date must b late of filing.)	e date of filing: 2 3 80 1/2 be specific and cannot be more that	(OPTIONAL) n five business days prior
	Signature of a memt	per or an authorized representative of a	member.
	(In accordance with s	action 605 0208 Florida Statutes, the ex	recution .
	<del></del>	Typed or printed name of signee	2014 FE SECRE
			<b>芸当 69 -</b>
		•	ARY OF

Page 2 of 2