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TALLAMASSEE FRANCE

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cov	VER LETTER TABLE
TO: Registration Section Division of Corporations	ART IN THE SERVICE OF
SUBJECT: CTS FIT Name of Lim	ided Liability Company
The enclosed Articles of Organization and fee(s) are	e submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
JEffREY	Name of Person
	Firm/Company
	ckwood Rd Apt 1A
North PA Conten E-mail address: (to be used	IM BEACH FL 33408 ity/State and Zip Code V + 1 IM @ YA Hoo. COM d for future annual-report notification)
For further information concerning this matter, plea	
JEFFREY A SMITH at (508 527 - 0330 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	,
\$125.00 Filing Fee Status \$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited 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 is:
Principal Office Address: Mailing Address:
1531 PACKWOOD Rd APT 1A NORTH PAIM BEACH FL 33408 NORTH PAIM BEACH FL 33408
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
JEffREY A SMITH
1531 PACKWOOD Rd ApT 1A Florida street address (P.O. Box NOT acceptable)
NORTH PAIM BEACH FL 33408 City Zip
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 605, F.S
Registers Agent's signature (REQUIRED)
(CONTINUED)
Page 1 of 2 Page 2 of 2 Page
#

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager A M B R	JEFFREY A SMITH 1531 PACKWOOD RD ADTIA NORTH PAIM BEACH FL 3340
AMBR	Adrian ROGERS 1957 BRANDYWINE #206 WEST PAIM BEACH FL 33
-	
(Use attachment if necessary)	
LE VI: Other provisions, if any.	
LE VI: Other provisions, if any. REQUIRED SIGNATURE:	Aug a Smith
Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	More or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document r the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.) FREY A SMITH
Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	5.0203 (1) (b), Florida Statutes, the execution of this document r the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State
Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	Typed or printed name of signee Filing Fees:
Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	Typed of printed name of signee Filing Fees: ganization and Designation of Registered Agent

ARTICLE IV-