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.

(((H15000000873 3)))



H150000008733ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser	
page. Doing so will generate another cover sheet,	

To:

Division of Corporations

Fax Number

: (950)617-6383

From:

Account Name : CORP USA

Account Number: 072450003255

Phone

: (305)634~3694

fax Number

: (305)633~9696

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. BEEFREE MEDIA LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Filethis 2nd

Once Beefree Holdings LL gets filed. Thank you T CLINE

Electronic Filing Menu

Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

COK6 N24

1/2/2015

9696889908 91:51 \$102/20/10

PAGE 01/03

H150000008713

(9)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1

The Name of the Limited Liability Company shall be: BEEFREE MEDIA LLC

图 第 20

ARTICLE 11

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the act.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is: 2312 NO. MIAMI AVE., MIAMI, FL 33127

ARTICLE IV

The name of the Managing Member(S) shall be:

BEEFREE HOLDINGS LLC 2312 NO. MIAMI AVE MIAMI, FL 33127

ARTICLE V

The name and Florida street address of the registered agent shall be:

JASON SPEIGEL 2312 NO. MIAMI AVE MIAMI, FL 3327

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

BEEFREE MEDIA LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Signature of Registered Agent

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JASON SPEIGEL

Typed or printed name signee

H15000000072