

**L15000238292**

**Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : SUPERBIZ.COM, INC.  
Account Number : I20070000160  
Phone : (800)494-3124  
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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
SeaSide Management LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 OCT -5 PM 6:33

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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I NAME**

The name of the Limited Liability Company is:

SEASIDE MANAGEMENT LLC

**ARTICLE II ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

701 PINE DRIVE #209  
POMPAÑO BEACH, FLORIDA 33060

**ARTICLE III REGISTERED AGENT**

The name and the Florida street address of the registered agent are:

JEAN-PIERRE GROULX  
701 PINE DRIVE #209  
POMPAÑO BEACH, FLORIDA 33060

*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.*

X

  
JEAN-PIERRE GROULX / Registered Agent's signature

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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PAGE 2 SEASIDE MANAGEMENT LLC

**ARTICLE IV**

The name and address of each person authorized to manage and control the Limited Liability Company:

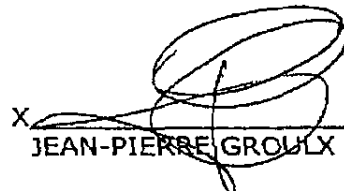
AUTHORIZED MEMBER

JEAN-PIERRE GROULX

701 PINE DRIVE #209

POMPANO BEACH, FLORIDA 33060

.....

X 

JEAN-PIERRE GROULX / Authorized Representative's signature

*(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. 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.)*

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