

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L16000142904  
FILED 8:00 AM  
July 29, 2016  
Sec. Of State  
tchang**

**Article I**

The name of the Limited Liability Company is:

INTELICOR LLC

**Article II**

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

1900 WEST OAKLAND PARK BLVD.  
OAKLAND PARK, FL. 33310-9998

The mailing address of the Limited Liability Company is:

PO BOX 101655  
FORT LAUDERDALE, FL. US 33310

**Article III**

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

SHAWN LEPORE  
1900 WEST OAKLAND PARK BLVD.  
OAKLAND PARK, FL. 33310-9998

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.

Registered Agent Signature: SHAWN LEPORE

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR  
DEBBIE LEPORE  
PO BOX 101655  
FORT LAUDERDALE, FL. 33334 US

Title: MGR  
SHAWN LEPORE  
PO BOX 101655  
FORT LAUDERDALE, FL. 33334 US

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### **Article V**

The effective date for this Limited Liability Company shall be:

07/29/2016

Signature of member or an authorized representative

Electronic Signature: SHAWN LEPORE

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.