

Division of Corporations

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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICESFLORIDA LIMITED LIABILITY CO.
MASH INVESTMENTS, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
FOR**

MASH INVESTMENTS, LLC
a Florida limited liability company

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

ARTICLE I- NAME:

The name of the limited liability company is: **MASH INVESTMENTS, LLC.**

ARTICLE II- ADDRESS:

The address of its principal place of business, as well as the mailing address for this limited liability company is: 2006 NW 2ND Avenue, Delray Beach, Florida 33444.

**ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S
SIGNATURE**

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

MARC KREAMER, 2006 NW 2ND Avenue, Delray Beach, Florida 33444

Having been named as registered agent and to accept service of process for the above state 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.



MARC KREAMER, Registered Agent

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE IV

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

TITLE:

NAME AND ADDRESS:

Member

MARC KREAMER, as Trustee of the
KREAMER CONTINUATION TRUST
2006 NW 2ND Avenue, Delray Beach,
Florida 33444

Member

RANDEE KREAMER
2006 NW 2ND Avenue, Delray Beach,
Florida 33444

Manager

MARC KREAMER
2006 NW 2ND Avenue, Delray Beach,
Florida 33444

ARTICLE - V - Effective Date, if other than the date of filing: _____ (Optional)

ARTICLE- VI- Other provisions, if any.

REQUIRED SIGNATURE:



MARC KREAMER, Authorized Member

(In accordance with Section 605.0203 (1)(b), Florida Statute, 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 s817.155, F.S.)

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