

STATE of FLORIDA LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

ARTICLE I - Name:

The name of the Limited Liability Company is TKEM Investments, LLC.

ARTICLE II - Address:

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

Principal Office Address: 26 Combes Avenue Rockville Centre, New York 11570 <u>Mailing Address</u>: 26 Combes Avenue Rockville Centre, New York 11570

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

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

Vcorp Services, LLC 5011 South State Road 7, Suite 106 Davie, Florida 33314 Broward County

ed Agent's Signature (REQUIRED)

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.

ARTICLE IV:

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

<u>Title</u>: MGR

Name and Address:

Timothy Kelly 26 Combes Avenue Rockville Centre, New York 11570

Timothy Kelly,

This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. 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.