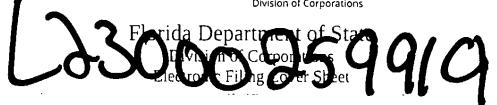
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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. **Infinite Brothers Group LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Infinite Brothers Group L	.LC		
(Must contain	the words "Limited Liability	Company, "L.L.C.," or "I	.LC.")
TICLE II - Address:			
maiting address and street addr	ess of the principal office of	the Limited Liability Comp	pany is:
	ess of the principal office of Office Address:		pany is: iling Address:
Principal (Mai	

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

Registered Agents Inc				
	Name			
7901 4th St N		STE 300		
Florida street addres	s (P.O. Box <u>N</u> o	OT acceptable)		
St. Petersburg	FL	33702		
City	State	Zip		

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. 🛵 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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3	w	111		F	11.

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

Title:	Name and Address:
"AMBR" = Authoriz	ed Member
"MGR" = Manager AMBR	MCANSLEY DUBUISSON
AMOR	7901 4th St N STE 300
	St. Petershurg, EL 33702
	•
AMBR	JERRY JONES JR.
	7901.4th St N STE 300
	St. Petersburg, FL 33702
AMBR	EDWIN ALEXIS
AMDA	7901 4th St N STE-300
	St. Petersburg, FL 33702
AMBR	DWAYNE JONES JR.
****	7901 4th St N STE 300
	St. Petersburg, FL 33702
he date of filing.) Note: If the date inserted in the document's effective date ARTICLE VI: Other provision	he date must be specific and cannot be more than five business days prior to or 90 days after his block does not meet the applicable statutory filing requirements, this date will not be listed as on the Department of State's records. In this day, if any, steed in last page that is attached.
Time additional members is	net mast page that to dilutated
REQUIRED SIGNA	ATURE:
l am	Signature of a member or an authorized representative of a member. document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, aware that any false information submitted in a document to the Department of State titutes a third degree felony as provided for in s.817.155, F.S.
	Robin Jones
	Typed or printed name of signee

Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

AMBR

. .

DAVID PUN 7901 4th St N STE 300 St. Petersburg, FL 33702

AMBR

MELVIN COCKROFT JR. 7901 4th St N STE 300 St. Petersburg, FL 33702

AMBR

ALVIN HOLMES II 7901 4th St N STE 300 St. Petersburg, FL 33702