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Florida Department of State
 Division of Corporations
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From: Account Name : BACHELOR AND ASSOCIATES, INC.
 Account Number : I20000000120
 Phone : (954)752-2758
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 DIVISION OF CORPORATIONS
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**FLORIDA LIMITED LIABILITY CO.
 TTC Generator Services, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION
OF
TTC Generator Services, LLC**

The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

**ARTICLE I
NAME**

The name of this limited liability company is:

TTC Generator Services, LLC

**ARTICLE II
PRINCIPAL OFFICE/MAILING ADDRESS**

The principal office and mailing address of this limited liability company is:

4304 Northwest 95th Terrace
Sunrise, Florida 33351

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED
AGENT'S SIGNATURE**

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

Gary Montaque
4304 Northwest 95th Terrace
Sunrise, Florida 33351

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.



Gary Montaque
Registered Agent

Prepared By: Ingrid M. Bachelor CPA
License No. AC-0032360
10235 West Sample Road
Suite 205
Coral Springs, FL 33065
954-752-2758

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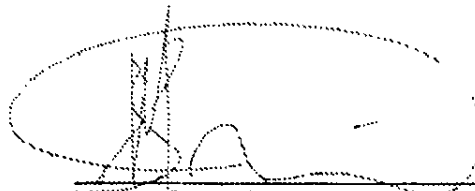
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**ARTICLE IV
MANAGEMENT**

The limited liability company is to be managed by its members and is, therefore, a member-managed company. The name and address of each Manager or Managing Member is as follows:

Gary Montaque
4304 North West 95th Terrace
Sunrise, Florida 33351

Manager



Name: Gary Montaque
Title: Authorized Representative of the Members.

(In accordance with Section 605.0203(1)(b) Florida Statutes, the execution of this document constitutes an affirmation under 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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