

Division of Corporations

Page 1 of 2

# L02000022108

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)205-0383

From:  
Account Name : KANETSKY, MOORE & DEBOER, P.A.  
Account Number : 075350000267  
Phone : (941)485-1571  
Fax Number : (941)484-7226

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DIVISION OF CORPORATION

## LIMITED LIABILITY COMPANY

The Advisors Planning Group, LLC

BK

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

**THE ADVISORS PLANNING GROUP, LLC**

ARTICLE II - Address

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

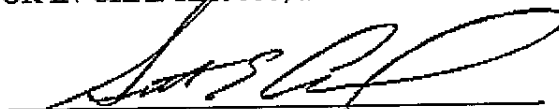
901 Venetia Bay Blvd., Ste. 350  
Venice, FL 34292

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

The name and street address of the registered agent are:

Scott E. Aabel  
901 Venetia Bay Blvd., Ste. 350  
Venice, FL 34292

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 608, F.S.

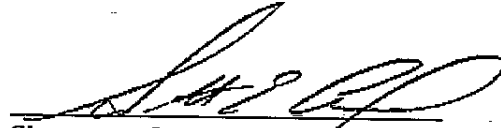


Scott E. Aabel

This instrument prepared by:  
Erik R. Lieberman, Esq.  
P. O. Box 1767  
Venice, FL 34284-1767  
941-485-1571  
FL Bar #393053

ARTICLE IV - Management (Check Box if Applicable)

\*The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company



Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Scott E. Aabel

Typed or Printed Name of Signer

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2 AUG 27 PM 3:33  
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SECRETARY OF STATE

This instrument prepared by:  
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Venice, FL 34284-1767  
941-485-1571  
FL Bar #393053