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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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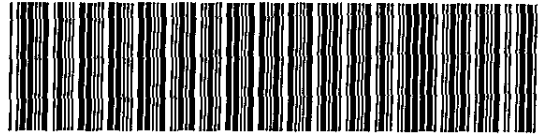
(Business Entity Name)

(Document Number)

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# Therrel Baisden, P.A.

ATTORNEYS AT LAW

ESTABLISHED 1925

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August 12, 2003

**VIA FEDERAL EXPRESS**

Secretary of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: Best Tax Center of PSL, LLC  
Our File No. 202323

Gentlemen:

Enclosed herein are the original Articles of Organization for the captioned limited liability company. We enclose a check in the amount of \$130.00 to cover the following costs:

Filing Fee for Limited Liability Company	\$100.00
Registered Agent Designation	25.00
Certificate of Status	5.00
Total for Limited Liability Company	<u>\$130.00</u>

Please return a certificate of status with your recording date acknowledging the filing of the documents to the undersigned.

With kindest regards,

Very truly yours,

Therrel Baisden, P.A.

By: \_\_\_\_\_

Mark M. Hasner

MMH:lc

Encl.

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**ARTICLES OF ORGANIZATION  
FOR  
BEST TAX CENTER OF PSL, LLC**

**ARTICLE I**

**Name**

The name of the Limited Liability Company is **BEST TAX CENTER OF PSL, LLC**.

**ARTICLE II**

**Address**

The mailing address and street address of the principal office of the Limited Liability Company is: c/o Generic Insurance Agencies of North Central Florida, Inc., 330 N.E. 39<sup>th</sup> Avenue, Suite B, Gainesville, Florida 32609.

**ARTICLE III**

**Duration**

This period of duration for the Limited Liability Company shall be: PERPETUAL.

**ARTICLE IV**

**Purpose**

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which limited liability companies may be organized under the Florida Limited Liability Company Act.

**ARTICLE V**

**Registered Agent**

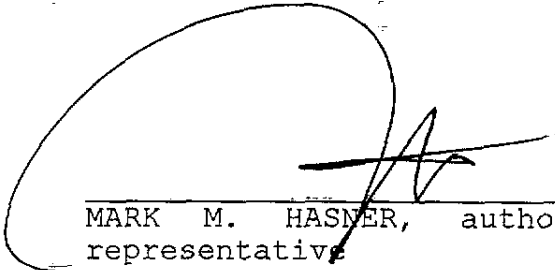
The street address of the initial registered office of the Limited Liability Company shall be Therrel Baisden, P.A., SunTrust International Center, One S.E. 3rd Avenue, Suite 2400, Miami, Florida 33131 and the name of the initial registered agent of the Limited Liability Company at that address is Mark M. Hasner, Esq.

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**ARTICLE VI**  
**Manager-Managed Company**

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

The undersigned authorized representative of BEST TAX CENTER OF PSL, LLC, hereby executes these articles of organization on this 12<sup>th</sup> day of August, 2003.

  
\_\_\_\_\_  
MARK M. HASNER, authorized  
representative

FILED  
AUG 12 2003  
CLERK OF COURT  
JULIA M. HARRIS

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is **BEST TAX CENTER OF PSL, LLC.**
  
2. The name and the Florida street address of the registered agent and office are:

Mark M. Hasner, Esquire  
Therrel Baisden, P.A.  
SunTrust International Center  
One S.E. 3rd Avenue, Suite 2400  
Miami, Florida 33131

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.

\_\_\_\_\_  
Mark M. Hasner



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