

L04000056274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

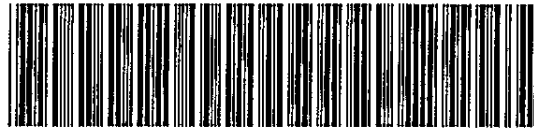
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500039422115

07/28/04--01008--019 **160.00

FILED
2004 JUL 28 PM 1:51
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN JUL 29 2004

Michael E. Fuerst, Ph.D.

701 Brickell Key Boulevard, Suite 2310
Miami, Florida 33131
Telephone: 305-374-0726
Facsimile: 305-374-2722
E-mail: mefuerstphd@yahoo.com

July 26, 2004

Florida Department of State
Registration Section
Division of Corporations
Post Office Box 6372
Tallahassee FL 32314

Dear Sir or Madam:

Please find attached the Articles of Organization for my limited liability company.

Please find enclosed a check for \$160.00 as payment for:

\$100.00	Filing Fee
25.00	Designation of Registered Agent
30.00	Certified Copy
<u>5.00</u>	Certificate of Status
\$160.00	Total

Should you have any questions, please contact me at 305-374-0726.

Sincerely,



Michael E. Fuerst, Ph.D.

FILED
2004 JUL 28 PM 1:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Biscayne Consulting Associates LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael E. Fuerst, Ph.D.
(Name of Person)

(Firm/Company)

701 Brickell Key Boulevard, Suite 2310
(Address)
Miami, Florida 33131
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael E. Fuerst, Ph.D. at (305) 374-0726
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
2004 JUL 28 PM 1:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
2004 JUL 28 PM 1:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Biscayne Consulting Associates LLC

ARTICLE II - Address:

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

Principal Office Address:

701 Brickell Key Blvd.
Suite 2310
Miami, Florida 33131

Mailing Address:

701 Brickell Key Blvd.
Suite 2310
Miami, Florida 33131

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

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

Michael E. Fuerst, Ph.D.
Name
701 Brickell Key Blvd. Suite 2310
Florida street address (P.O. Box **NOT** acceptable)
Miami, FLORIDA 33131
City, State, and 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. 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 Florida Statutes..

Michael E. Fuerst Ph.D.
Registered Agent's Signature

FILLED
2004 JUL 28 PM 1:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Michael E. Fuerst, Ph.D.
701 Brickell Key Blvd. Suite 2310
Miami, Florida 33131

MGRM

Timothy R. Burch, Ph.D.
115 Sunrise Dr. #5B
Key Biscayne, Florida 33149

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Michael E. Fuerst, Ph.D.
Signature of a member or an authorized representative of a member.

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

Michael E. Fuerst, Ph.D.
Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)