

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L05000087653  
FILED 8:00 AM  
September 06, 2005  
Sec. Of State  
mhodges

**Article I**

The name of the Limited Liability Company is:  
PROFESSIONAL PAYMENT SYSTEMS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
C/O RONNY J. HALPERIN, PA  
312 SE 17 ST., SECOND FLOOR  
FORT LAUDERDALE, FL. 33316

The mailing address of the Limited Liability Company is:  
C/O RONNY J. HALPERIN, PA  
312 SE 17 ST., SECOND FLOOR  
FORT LAUDERDALE, FL. 33316

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
RONNY J. HALPERIN, PA  
312 SE 17 ST.  
SECOND FLOOR  
FORT LAUDERDALE, FL. 33316

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.

Registered Agent Signature: RONNY HALPERIN, PRESIDENT

## **Article V**

The name and address of managing members/managers are:

Title: MGRM  
STEVEN BREIER  
C/O RONNY J. HALPERIN PA, 312 SE 17 ST,  
FORT LAUDERDALE, FL. 33316

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Signature of member or an authorized representative of a member

Signature: RONNY HALPERIN, AUTH. REP.