Division of Corporations Public Access System

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Division of Corporations Fax Number : (850)517-6383

om:
Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : 120010000247
Phone : (800)494-3124
Fax Number : (581)455-9885

Electronic Filing Menu

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Accounting Services of Delray Beach, LLC

Certificate of Status Certified Copy 0 Page Count 02 Estimated Charge \$125.00

Corporate Filing Menu

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is: ACCOUNTING SERVICES OF DELRAY BEACH, LLC

ARTICLE II ADDRESS

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

1022 E. HERITAGE CLUB CIRCLE

DELRAY BEACH, FLORIDA 33483

ARTICLE III REGISTERED AGENT. REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

CLAUDIA M. SEGGEL 1022 E. HERITAGE CLUB CIRCLE DELRAY BEACH, FLORIDA 33483

Having been named as registered agent 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 complywith 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.

X Claudia M. SEGGEL/ Registered Agent's signature

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ACCOUNTING SERVICES OF DELRAY BEACH, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V _ MEMBERS (optional)

MANAGING MEMBER: CLAUDIA M. SEGGEL 1022 E. HERITAGE CLUB CIRCLE DELRAY BEACH, FLORIDA 33483

x Claudia M. Siggel

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.

CLAUDIA M. SEGGEL

Typed or printed name of signee

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SECRETARY OF STATE