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Registration Section

Division of Corporations

TO:

Balcells Financial Group, LLC. SUBJECT: 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: Janet Balcelis Name of Person Baicelis Financial Group, LLC. Firm/Company 14887 SW 40th CT Address Miramar, FL 33027 City/State and Zip Code balcellsgroup@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Janet Balcells** Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: \$125.00 Filing Fee \$\sum \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street/Courier Address **Mailing Address** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

	Balcells Financial Gro th the words "Limited Lia	oup, LLC. bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and st	reet address of the	principal office of the Limited	Liability Company is:
Principal Office Address		Mailing Address:	
14887 SW 40th CT		14887 SW 40th CT	
Miramar, FL 33027		Miramar, FL 33027	
	annot serve as its own Regida registration.) street address of the Jose A. Bale Name 14887 SW 40	cells ne oth CT	
		ddress (P.O. Box <u>NOT</u> acceptable)	P ~
	Miramar,	FL 33027 State, and Zip	
liability company at the registered agent and agree statutes relating to the pr	gistered agent and to place designated in to act in this capac coper and complete p	o accept service of process for the accept service of process for the accept service. I hereby accept sity. I further agree to comply we performance of my duties, and I gistered agent as provided for in	the appointment as ith the provisions of all am familiar with and

Page 1 of 2

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	Jose A. Balcelis	
	14887 SW 40th CT	
	Miramar, FL 33027	
MGRM	Janet Balcells	
	14887 SW 40th CT	
	Miramar, FL 33027	
MGRM	Alexander Balcells	
	14887 SW 40th CT	
	Miramar, FL 33027	
MGRM	Christian Balcelis	
	14887 SW 40th CT	
	Miramar, FL 33027	
	ne date of filing: (OPTIONA be specific and cannot be more than five business day	
REQUIRED SIGNATURE:	Alakella SEP 16 Programme of a member.	で下に口
Sin A sin S	Tracella mo	(11)
	/	ب
constitutes an affirmation under I am aware that any false info	08.408(3), Florida Statutes, the execution of this document. ler the penalties of perjury that the facts stated herein activities. commation submitted in a document to the Department of Blate only as provided for in s.817.155, F.S.)	
	Janet Balcells	
T	Typed or printed name of signee	
Filing Fees:		

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)