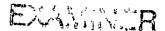
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DATE:

11-09-2011

NAME:

CATALANO CONSULTING LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST:

\$125

**RETURN:** 

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

assistedy

## **COVER LETTER**

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TO: Registration Division of C				My Or Conference
	-			14 OSATE
SUBJECT: CATALA	ANO CONSULTING LLC	Addishing Comment		رقع والمراجع
	Name of Lim	ted Liability Company		هج
The enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
		Name of Person		
		Firm/Company		
<u></u>		Address		
<del></del>	C	ty/State and Zip Code		
	mdirenza@ecker			_
		for future annual report notification)		
For further information	concerning this matter, pleas	se call:		
PATRICK J. CATALA	ANO	at (954') 290-3132		
Name	of Person	Area Code & Daytime Telep	phone Number	
Enclosed is a check f	or the following amount:			
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section	Street/Courier Address Registration Section		

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
Clifton Building
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	y is:
CATALANO COUNSULTING LLC	Liability Company, "L.L.C.," or "LLC.")
(wilst each with the words Thursen t	Jabunty Company, L.L.C., or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6628 PATIO LANE	SAME
BOCA RATON, FLORIDA 33433	
	ered Office, & Registered Agent's Signature: tegistered Agent. You must designate an individual or another he registered agent are:
PATRICK J. CATALANO	
N	ame
6628 PATIO LANE	
Florida stree	t address (P.O. Box <u>NOT</u> acceptable)
BOCA RATON	PL 33433
City	, State, and Zip
	to accept service of process for the above stated limited

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..

Registered Agent's Signature (REQUIRED)

PATRICK J. CATALANO (CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address:
MGRM	PATRICK J. CATALANO 6628 PATIO LANE BOCA RATON, FLORIDA 33433
are the second	
(Use attachment if necessal ARTICLE V: Effective date, if oth (If an effective date is listed, the date or 90 days after the date of filing	ner than the date of filing: (OPTIONAL) nete must be specific and cannot be more than five business days prior
REQUIRED SIGNATUR  × / / C Signature	E:  Chief Matter  of a member of an authorized representative of a member.
of this dox	ance with section 608.408(3), Florida Statutes, the execution council to the same affirmation under the penalties of perjury acts stated herein are true.)
יו מד גמ	K I CATALANO

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)

Page 2 of 2

Typed or printed name of signee