L99000002379

ASSET SOLUTIONS

4/23/99

Florida Department of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Greetings,

Enclosed you will find the documents for the creation of Asset Solutions, LLC. Please for ward the acknowledgment and Certificate of Status to me at 3800 Inverrary Blvd. Suite 210, Lauderhill, FL 33319.

Best Regards,

ROBERT M. DAVIS
ASSET SOLUTIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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Name Availability
Document Examiner
Updater
Updater Verifyer
Acknowledgement
. P. Verifyer

3038 NORTH FEDERAL
HIGHWAY
FORT LAUDERDALE
FLORIDA 33306
954-566-2955 x 15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ASSET SOLUTIONS, LLC

ARTICLE II - Address:

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

3038- C North Federal Highway Fort Lauderdale, FL 33306

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DIVISION OF CORPORATIONS
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ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management:
(Check the appropriate box and complete the statement)

☑ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Robert M. Davis 3038- C North Federal Highway Fort Lauderdale FL

☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Additional members may be added upon a vote of a majority of the existing members.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The remaining members may continue the business upon the death of one or more members upon a majority vote of the surviving members.

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of ASSET SOLUTIONS, LLC certifies:

1) the above named limited liability company has at least one member;
2) the total amount of cash contributed by the member(s) is $ 17,500 ;
3) if any, the agreed value of property other than cash contributed by member(s) is $ _____ ; (A description of the property is attached and made a part hereto.); and
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is $ 17,500 .

Signature of a member or an authorized representative of a member.

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

Robert M. Davis
Typed or printed name of signee

Filing Fee: $250.00 for Articles and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: ASSET SOLUTIONS, LLC

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

Robert M. Davis 3038- C North Federal Highway Fort Lauderdale FL 33304

NAME

Florida street address (P. O. Box NOT ACCEPTABLE)

FL
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.

SIGNATURE

Filing Fee: $ 35 for Designation of Registered Agent