

L00000000003/6

Charter Number Only

1/7/00

Robert B. Silver

Requestor's Name

16421 Bridalwood Cir.

Address

Delray Beach, FL 33445

City

State

ZIP

Phone

VALIDATION ONLY

CORPORATION(S) NAME

PlantiFF Connect . Com.

100003092551--4

-01/10/00--01019--012

****155.00 ****155.00



Empire Toll Free: 1-800-432-3028

RECEIVED

00 JAN 10 AM 9:30

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

() Profit

() NonProfit

() Amendment

() Merger

() Foreign

() Dissolution

() Mark

() Limited Partnership

() Annual Report

(X) Other LL

() Reinstatement

() Reservation

() Change of Registered Agent

() Certified Copy

() Photo Copies

() Certificate Under Seal

() Call When Ready

() Call If Problem

() After 4:30

(X) Walk In

() Will Wait

(X) Pick Up

() Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

CR2E031 (R8-85)

WB
1-10-00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PLAINTIFFCONNECT.COM.

ARTICLE II - Address:

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

16421 BRIDLEWOOD CIRCLE
DELRAY BEACH, FL 33445

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

PATRICIA L. SILVER
Name
16421 BRIDLEWOOD CIRCLE.
Florida street address (P.O. Box NOT acceptable)
DELRAY BEACH FL 33445
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 as provided for in Chapter 608, F.S.

[Signature]
Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

[Signature]
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.)

PATRICIA L. SILVER
Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)

APPROVED
AND
FILED
00 JAN 10 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B-1000

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Patricia L. Silver
 Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Patricia L. Silver
 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.)

PATRICIA L. SILVER
 Typed or printed name of signer

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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