L0000000000338

Florida Department of State Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

Enclosed is an original and one copy of the proposed Articles of Organization of Integrity Financial Systems, LLC, a proposed limited liability company. Please file the Articles of Organization and return a letter of acknowledgement to the address ested below.

I enclose a check for \$125 to cover the following:

\$100.00 Filing fee for Articles of Organization & Affigavit 25.00 Designation of Registered Agent

Sincerely,

Michael Parmon

Michael P. Arman

Integrity Financial Systems. LLC 740 S. Ridgewood Ave.

Ormond Beach, FL 31274

600003130016--7 -02/09/00--01095--001 ****125.00 ****125.00



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

February 14, 2000

MICHAEL ARMAN 740 S. RIDGEWOOD AVE ORMOND BEACH, FL 31274

SUBJECT: INTEGRITY FINANCIAL SYSTEMS LLC

Ref. Number: W0000003885

OO FEB 28 PM 1:31
SECRETARY OF STATE
TALL AHASSEF, FLORIDA

We have received your document for INTEGRITY FINANCIAL SYSTEMS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline Document Specialist

Letter Number: 000A00007541

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: |
|--|
| The name of the Limited Liability Company is: |
| Integrity Financial Systems, LLC ARTICLE II - Address: |
| ARTICLE II - Address: |
| The mailing address and street address of the principal office of the Limited Liability Company is: |
| 740 S. Ridgewood Ave Orward Beach, FL 32174 |
| Orward Beach, FL 32174 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: |
| Mile I D Arman ER E |
| Michael P Arman ARR EB 28 740 S. Ridgewood Are SERY |
| 740 S. Ridge wood Ave MAZ @ |
| Florida street address (P.O. Box NOT acceptable) |
| Ormord Beach FL 32174 == |
| 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 |
| \mathcal{M}_{i} \mathcal{D}_{i} \mathcal{D}_{i} |
| Registered Agent'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. |
| |
| \sim 11. \sim |
| |
| (An additional article M. Armon ive date is requested) |
| 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.) |
| |

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)