

L00000003044



ACCOUNT NO. : 072100000032

REFERENCE : 620116 7207909

AUTHORIZATION :

COST LIMIT : \$ 125

Patricia Pizeto

FILED
00 MAR 16 PM 4: 58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : March 10, 2000

ORDER TIME : 2:56 PM

ORDER NO. : 620116-005

CUSTOMER NO: 7207909

000003173520--2

CUSTOMER: Mr. David P. Wieder
MR. DAVID P. WIEDER
MR. DAVID P. WIEDER
11 West 25th Street 7th Floor
C/o Domini
New York, NY 10010-2001

DOMESTIC FILING

NAME: COMMITTED CAPITAL, LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

EXAMINER'S INITIALS:

100-3044

Name	<i>OK</i>
Availability	<i>OK</i>
Document	<i>OK</i>
Examination	<i>OK</i>
Update	<i>OK</i>
W. P. Verifier	<i>OK</i>

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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RECEIVED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

COMMITTED CAPITAL, LLC

ARTICLE II - Address:

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

10900 STAFFORD CIRCLE SOUTH, BOYNTON BEACH, FLORIDA 33436

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

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

DAVID P. WEIDER
Name
10900 STAFFORD CIRCLE SOUTH
Florida street address (P.O. Box NOT acceptable)
BOYNTON BEACH FL 33436
City, State, and Zip

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TALLAHASSEE, FLORIDA

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..

Please see attached signature page

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)

Laura R. Dunlap
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.)

AUTHORIZED REPRESENTATIVE, LAURA R. DUNLAP
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)

ACCEPTANCE OF REGISTERED AGENT
DESIGNATED IN THE ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

David P. Wieder, an individual residing in this state, having a business office identical with the registered office of the corporation named below, and having been designated as the Registered Agent in the above and foregoing Articles of Incorporation of:

COMMITTED CAPITAL, LLC

David P. Wieder is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

By: 

Typed Name: David P. Wieder

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Corporation ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of COMMITTED CAPITAL, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein by CSC without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this
10 day of MARCH, 192002

WITNESS

SIOWARD MOSER
TYPED OR PRINTED NAME

WITNESS

ADAM KANZER
TYPED OR PRINTED NAME

SIGNATURE

DAVID P. WIEDER
TYPED OR PRINTED NAME

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA