

Division of Corporations
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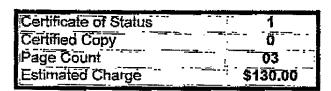
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# LIMITED LIABILITY COMPANY

**Outsource CFO, LLC** 



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# ARTICLES OF ORGANIZATION

Outsource CFO, LLC

## ARTICLE I

#### NAME

The name of the limited liability company shall be: Outsource CFO, LLC

#### ARTICLE II

## PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 10775 Richmond Place, Cooper City, Florida 33026.

## ARTICLE III

# INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Ian Benoliel, 10775 Richmond Place, Cooper City, FL 33026. Located in the County of Broward.

#### ARTICLE IV

#### DURATION

The duration for the limited liability company shall be: 12/31/2040.

#### ARTICLE V

### **MANAGERS**

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are; Ian Benoliel, 10775 Richmond Place, Cooper City, Florida 33026

Rick Oster, Authorized Representative

Prepared by Richard Oster, Business Filings, 8025 Excelsior Dr. Suite 200, Madison WI

(608) 827-5300.

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES. THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA. SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

The name of the lumited liability company is: Outsource CFO, LLC

The name and address of the registered agent and office is Ian Benoliel, 10775 Richmond Place, Cooper City, FL 33026. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated corporation 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:

Total Charles Shall

Date: May 15, 2000

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