

Division of Corporations
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Division of Corporations

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LIMITED LIABILITY COMPANY

Florida Business Financial Consulting LLC

| | <u> </u> |
|-----------------------|----------|
| Certificate of Status | 1 |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

Florida Business Financial Consulting LLC

ARTICLE II - ADDRESS

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

5538 Lehigh Avenue - Apt. 77 Orlando, FL 32807

ARTICLE III - DURATION

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

Perpetual

ARTICLE IV - MANAGEMENT

(check and complete the appropriate 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:
- 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:

Timothy C. Gobbel 5538 Lehigh Avenue - Apt. 77 Orlando, FL 32807

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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ARTICLES V - ADMISSION OF ADDITIONAL MEMBERS

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

ARTICLES 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:

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Signature of a member or authorized representative of a member.

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

Timothy C. Gobbel

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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 IN DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

| 1. The name of the limited liability | company is: Florida Business Financial Consulting LLC |
|--|--|
| 2. The name and address of the registe | red agent and office is: |
| | Timothy C. Gobbel |
| | Name |
| | 5538 Lehigh Avenue - Apt. 77 (P.O. Box or Mail Drop Box NOT Acceptable) |
| | Orlando, FL 32807 |
| | (City / State / 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.

Timothy C. Gobbel (Signature)

June 11, 2000

(Date)

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