## **Zeskind's Benefits Consulting**

Phone: 305 308-8729 Fax: 305 253-5932 Email: JeffreyZ@Email.MSN.Com

## **MEMO**

To: Florida Department of State

From: Jeffrey A. Zeskind

Re: Formation of Zeskind's Benefits Consulting, LLC

100003337001--5 -07/26/00--01086--002 \*\*\*\*125.00 \*\*\*\*125.00

Please find enclosed:

1. Articles of Organization

2. Operating Agreement

3. \$125 payment for (1) Filing fee for Articles of Organization and (2) Designation of Registered Agent

Direct all questions and/or comments to Jeffrey A. Zeskind at (305) 308-8729.

Jeffrey A. Zeskind

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P.O. Box 560666, Miami, Florida 33256-0666

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Article I – Name: The name of the Limited Liability Company is Zeskind's Benefits Consulting, LLC

Article II – Address: The mailing address is PO Box 560666, Miami, Florida 33256-0666. The street address is One Financial Plaza, Suite 130-3029, Ft. Lauderdale, Florida 33394.

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

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

Jeffrey A. Zeskind Name

8260 SW 160<sup>th</sup> Street Florida Street address

Miami, Florida 33157 City, State, and Zip O JUL 26 MM IO: 56

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.

Article IV - Management

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

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