

L01000007290

Robin K. Schneider
13880 White Gardenia Way
Fort Myers, FL 33912
Telephone (941) 777-1001

May 3, 2001

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Perfect Payroll, LLC

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-05/07/01--01144--007
*****125.00 *****125.00

Dear Sirs:

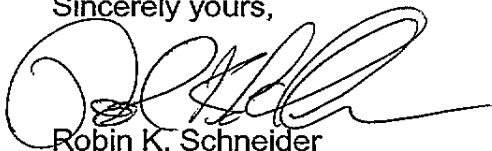
Enclosed with transmittal letter are an original and one (1) copy of the following documents for the proposed Limited Liability Company:

- 1) Articles of Organization
- 2) Designation of Registered Agent

A check in the amount of \$125.00 is also enclosed to cover the filing fees for the above listed documents:

- 1) \$100.00 Filing Fee for Articles of Organization.
- 2) \$25.00 Filing Fee for the Designation of Registered Agent.

Sincerely yours,



Robin K. Schneider

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01 MAY -7 PM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR PERFECT PAYROLL, LLC

ARTICLE I – Name

The name of the Limited Liability Company is Perfect Payroll, LLC.

ARTICLE II - Address

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

13880 White Gardenia Way
Fort Myers, FL 32912

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

13880 White Gardenia Way
Fort Myers, FL 32912

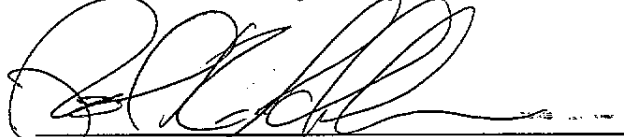
ARTICLE III – Registered Agent

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

Robin K. Schneider
13880 White Gardenia Way
Fort Myers, FL 32912

ARTICLE IV – Management

The Limited Liability Company is to be managed by the members.



Robin K. Schneider, Member

In accordance with section 608.403(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Submitted May 3, 2001

FILED
01 MAY -7 PM 8:21
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

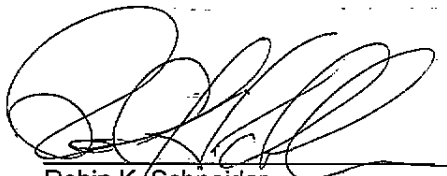
CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT / REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.145 OR 608.507 OF THE FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1) The name of the Limited Liability Company is Perfect Payroll, LLC.
- 2) The name and street address of the Registered Agent are:

Robin K. Schneider
13880 White Gardenia Way
Fort Myers, FL 32912

Having been named as the Registered Agent and to accept the service of process for the above stated Limited Liability Company at the place designated on this certificate, I hereby accept the appointment as registered agent and agree to act in the proper and complete performance of my duties. I am familiar with and accept the obligations of my position as Registered Agent.



Robin K. Schneider

May 3, 2001

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01 MAY -7 PM 8:21
STATE OF FLORIDA
TALLAHASSEE, FLORIDA