

LO10000007304

April 24, 2001

RE: Articles of Organization for Barrington & Associates, a Limited Liability Company

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32317

ATTN: Division of Corporations

400000138914--5
-05/07/01--01075--014
***160.00 ***160.00

Dear Sir or Madam:

Enclosed herein please find an original and one copy of properly executed Articles of Organization for Florida Limited Liability Company and acceptance of Registered Agent, for filing. Also enclosed is a check in the amount of one hundred sixty dollars (\$160.00), made payable to the Florida Secretary of State, to cover the following costs:

| | |
|-----------------------|-------------|
| Filing fee | 100.00 |
| Registered Agent Fee | 25.00 |
| Certified Copy | 30.00 |
| Certificate of Status | <u>5.00</u> |
| Total | \$160.00 |

FILED
MAY -7 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please forward the certified copy of Articles of Organization to the undersigned at the above address. If there are any questions, I can be reached by phone at 954 989-8219. Thank you for your attention.

Respectfully,


Robert Smoren

LO1-7304
OK

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Barrington & Associates, LLC

ARTICLE II - Address:

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

Mail: 5840 Stirling Road *Suite 112* Office: 3640 N. 56 Ave. #412
Hollywood, Florida 33021 Hollywood, Florida 33021

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

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

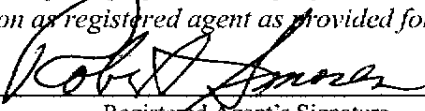
Robert Smoren

Name
3640 N. 56 Ave. #412

Florida street address (P.O. Box NOT acceptable)
Hollywood, FL 33021

City, State, and 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 as provided for in Chapter 608, F.S.



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)



Signature of a member of 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.)

Robert Smoren

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)

FILED
MAY -7 PM 3:53
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA