

Division of Corporations

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201000012457

Florida Department of State
Division of Corporations
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(((H01000085160 9)))

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AL1

LIMITED LIABILITY COMPANY

BENEFITS CONSULTANTS OF SOUTH FLORIDA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Audit No. H01000085160 9

ARTICLES OF ORGANIZATION
OF
BENEFITS CONSULTANTS OF SOUTH FLORIDA, LLC

ARTICLE I

The name of the limited liability company formed hereby is Benefits Consultants of South Florida, LLC (the "Limited Liability Company").

ARTICLE II

The duration of the Limited Liability Company shall be perpetual.

ARTICLE III

The mailing and street address of the principal office of the Limited Liability Company shall be as follows:

c/o Fowler, White, Burnett, Hurley, Banick & Strickroot, P.A.
100 S.E. Second Street
17th Floor
Miami, Florida 33131
Attn: Fred K. Lickstein

ARTICLE IV

The Registered Agent of the Limited Liability Company and his street address in the State of Florida are as follows:

Fred K. Lickstein, Esq.
Fowler, White, Burnett, Hurley, Banick & Strickroot, P.A.
100 S.E. 2nd Street, 17th Floor
Miami, Florida 33131

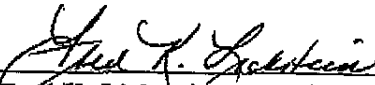
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ARTICLE V

The Limited Liability Company shall be a member-managed company.


Fred K. Lickstein, as Authorized Representative of the
Members of the Limited Liability Company

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TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
)
COUNTY OF MIAMI-DADE)

Before me personally appeared Fred K. Lickstein, as Authorized Representative of the Members of Benefits Consultants of South Florida, LLC, ☒ who is personally known to me, or ☐ who produced _____ as identification, to be the person who executed the foregoing Articles of Organization.

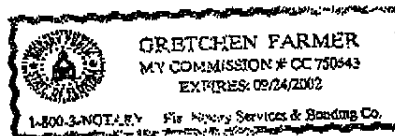
In witness whereof I have hereunto set my hand and official seal this 27th day of July, 2001.



Notary Public

Print Name: _____

My Commission expires: _____



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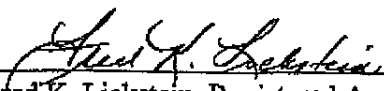
**CERTIFICATE OF DESIGNATION
OF RESIDENT AGENT AND
ACCEPTANCE OF DESIGNATION**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

1. The name of the limited liability company is Benefits Consultants of South Florida, LLC
2. The name and address of the Registered Agent and Office is:

Fred K. Lickstein, Esq.
Fowler, White, Burnett, Hurley, Banick & Strickroot, P.A.
100 S.E. 2nd Street, 17th Floor
Miami, Florida 33131

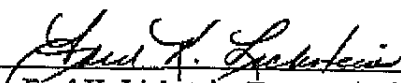
Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the Certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all Statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as Registered Agent.



Fred K. Lickstein, Registered Agent

Date: July 27, 2001

Benefits Consultants of South Florida, LLC

By: 

Fred K. Lickstein, Esq., as Authorized
Representative of the Members of the
Limited Liability Company

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