# ROBERT J. FLASTER, LLC CMA

1885 Shower Tree Way Wellington, FL 33414-5867 Office & Fax: 561-792-0689 Bob@flaster.com

# COCOOO5605 September 8, 2001

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

HLM

\*\*\*\*125.00 \*\*\*\*125.00

### Gentlemen:

Enclosed are the Articles of Organization to form StaffConnections, LLC, a single member LLC, as well as check #1204 for \$125.00 to cover the filing fee and cost for Designation of Registered Agent. Also, enclosed is an Application for Registration of Fictious Name for the LLC and a check #1205 for \$50.00 for the filing Fee.

Please contact me should you need any further information.

Sincerely,

Robert J. Flaster, CMA

Cc: Terry A. Clark 1921 Primrose Ln

Wellington, FL 33414

701A00051288

EP 10 AM 10: 28
ETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

STAFF CONVECTIONS, LLC

### ARTICLE II - Address:

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

WELLINGTON, FL 33414-8684

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

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

1885 SHOWER TREE WAY

Florida street address (P.O. Box NOT acceptable)

WECLINGTON FL 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 member or 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.)

TERRY A CLARK

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)