

L01000017665

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314

July 24, 2001

500004598705--9

-08/19/01--01062--019

***155.00 ***155.00

RE: DELIVERY OF ARTICLES OF ORGANIZATION OF L.L.C.

Dear Sir:

Enclosed please find an original and one executed copy of the Articles of Organization of BENEFITS 2000 L.L.C., a Limited Liability Company. A check for \$155.00 is enclosed for the delivery of the Articles of Organization and one (1) Certified Copy of the Articles of Organization.

The Registered Agent for BENEFITS 2000 L.L.C., is

ROGER KAMAN
1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA 32233

Please return all correspondence to registered agent.



ROGER KAMAN

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2001 OCT 15 PM 2:07

FILED

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 21, 2001

ROGER KAMAN
1015 ATLANTIC BLVD
#431
JACKSONVILLE, FL 32233

SUBJECT: BENEFITS 2000, L.L.C.
Ref. Number: W01000021969

We have received your document for BENEFITS 2000, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Shawn Logan
Document Specialist

Letter Number: 401A00052839

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
BENEFITS 2000, L.L.C.**

Pursuant to Florida Statute 608.407 the undersigned states as follows:

1. The name of the limited liability company is:

BENEFITS 2000, L.L.C.

2. The *mailing address and principal address of the registered office in Florida is:*

**1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA 32233**

located in the County of **DUVAL**.

3. The registered agent's name and *mailing and principal address is:*

**ROGER KAMAN
1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA 32233**

4. There are or will be two or more members at the time the limited liability company is formed.

5. The latest date on which the limited liability company is to dissolve is **December 31, 2041**.

6. The members shall, by approval of one or more members of the company, have the right to admit additional members to the company.

7. The remaining members of the limited liability company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company.

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TALLAHASSEE, FLORIDA

8. Management of the limited liability company is vested in a manager or managers.

ROGER KAMAN
1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA 32259

TRACY KAMAN
1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA 32259

9. The name and address of each person who is a
 Manager
 Member
at the time of formation of the limited liability company is:

ROGER KAMAN
1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA 32259

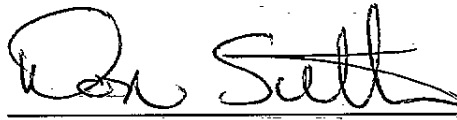
R & T FAMILY TRUST
1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA 32259

TRACY KAMAN
1015 ATLANTIC BLVD. #431
JACKSONVILLE, FLORIDA



ROGER KAMAN

DATED: 8/2/01



R & T FAMILY TRUST
BY: DAMEIN E. FUTCH

DATED: 8/2/01



ROGER KAMAN

DATED: 8/2/01

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Affidavit of Acceptance of Registered Agent

I, **ROGER KAMAN**, having been designated to act as Registered Agent, and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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, Florida Statutes.



ROGER KAMAN

DATED: 8/2/01

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