L01000018247

ROBERTS, SEWARD & COMPANY, P.A.

CERTIFIED PUBLIC ACCOUNTANTS
AND
REGISTERED INVESTMENT ADVISORS
505 EAST JACKSON STREET

SUITE 202
TAMPA, FLORIDA 33602

300004648213--6 -10/22/01--01060--018 ****125.00 ****125.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name) 2. (Corporation Name)	(Document #)		OI OCT 22 PM SEGRETARY OF TALLAMASSEE, F	
3(Corporation Name)	(Document #)	· • • · ·	STATE LORIDA	
4. (Corporation Name) Walk in Pick up time Mail out Will wait	(Document #) Photocopy	Certified Certificate	Copy e of Status	
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment Resignation of R Change of Regis Dissolution/Wit Merger REGISTRATION/ Foreign Limited Partner Reinstatement Trademark Other	hdrawal QUALIFICATIO	6-18	sde 1
		Examiner	's Initials	

ARTICLES OF ORGANIZATION

<u>of</u>

Liberty Financial Services, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is:

Liberty Financial Services, LLC

ARTICLE II - Address:

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

505 E. Jackson St. #202 Tampa, FL 33602

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

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

Richard A. Roberts 505 E. Jackson St. #202 Tampa, Fl 33602 OI OCT 22 PM 5: UV
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Name

Florida street address (P.O. Box <u>NOT</u> acceptable)

<u>Dunedin, Florida 34698</u>

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.

Registered Agent's Signature

That a That

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.

Signature of a 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.)

Richard A. Roberts

OI OCT 22 PM 5: UO
SEGRETARY OF STATE