

# Lo 200000 2131

January 4, 2002

EFFECTIVE DATE

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 700004764807--9 -01/10/02--01039--002 \*\*\*\*125.00 \*\*\*\*\*125.00

Attached is the filing of our Articles of Organization and a check in the amount of \$125.00. Please note that the effective date requested is January 1, 2002.

Respectfully submitted,

Nichole Morales

Meridian Financial Services Group, L.L.C.

PILED

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DISPOSATION: COMPORATION:

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## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 14, 2002

NICHOLE MORALES MERIDIAN FINANCIAL SERVICES GROUP LLC 6161 9TH ST N SUITE 204 ST PETERSBURG, FL 33703

SUBJECT: MERIDIAN FINANCIAL SERVICES GROUP, L.L.C.

Ref. Number: W02000001058

We have received your document for MERIDIAN FINANCIAL SERVICES GROUP, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 10, 2002. Please amend your document accordingly.

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: 002A00001816



### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	<b>I</b> -	Name:
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The name of the Limited Liability Company is:

MERIDIAN FINANCIAL SERVICES GROUP, L.L.C.

#### **ARTICLE II - Address:**

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

6161 9th Street North, Suite 204 St. Petersburg, FL 33703

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

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

Nichole Morales			
Name			
6161 9th Street North, Suite 2	14		
Florida street address (P.O. Box NOT acceptable)			
St. Petersburg FL 33703			
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

<u> Ar</u> ticle IV - Manageme	nt (Check box	if applicable.)
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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) added if an effective date is requested)

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.)

Nichole Morales

Effective date:

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)