

# L02000010725

**I.S.B.**  
1253 University Drive  
PMB 316  
Coral Springs, FL 33071

200005257752--3  
-04/12/02--01060--017  
\*\*\*\*135.00 \*\*\*\*130.00

Office Use Only

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

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

CR2E031(7/97)

Examiner's Initials

W02-10728  
J. BRYAN APR 17 2002  
J. BRYAN MAY 6 2002



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 17, 2002

I.S.B.  
1253 UNIVERSITY DR., PMB 316  
CORAL SPRINGS, FL 33071

SUBJECT: MONEY MANAGEMENT SERVICES LLC  
Ref. Number: W02000010728

FILED  
2002 APR 25 AM 9:12  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for MONEY MANAGEMENT SERVICES LLC and your check(s) totaling \$135.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the original and one copy of 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.

Joey Bryan  
Document Specialist  
Tax Liens

Letter Number: 302A00022804

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

MONEY MANAGEMENT SERVICES LLC

## ARTICLE II - Address:

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

1253 UNIVERSITY DR.

Suite 316, CORAL SPRINGS, FL 33071

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

TOM STEED

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

TOM STEED

Name

1750 N.W. 105 LANE

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

CORAL SPRINGS FL 33071

City, State, and Zip

FILED  
2002 APR 25 AM 9:12  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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.

Tom Steed

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)

Tom Steed

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.)

Tom Steed

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)