## L0200013647

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

auc

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Subject: The Organization of Easy Adult Money, LLC

Enclosed is an original and One (1) copy of the articles of organization and a check

\$100.00 Filing Fee for Articles of Organization	
\$25.00 Designation of Registered Agent	
\$30.00 Certified Copy (Optional)	MJH
\$5.00 Certificate of Status (Optional)	

From: Robert Ashley

791 N Pine Island Rd #205

Plantation FL 33324

954-423-6693

NOTE: Please provide the original and one copy of the

PILED

02 JUN -4 AM 9: 10

SECKLIDARY OF STATE
TALLAHASSIF FLORIDA



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 7, 2002

ROBERT ASHLEY 792 N. PINE ISLAND RD., #205 PLANTATION, FL 33324

SUBJECT: EASY ADULT MONEY, LLC Ref. Number: W02000006471

We have received your document for EASY ADULT MONEY, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the attached forms. The Articles of Organization cannot reference the terms "corporation", "stock", or "organizers".,

The registered agent must sign accepting the designation.

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 March 4, 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) 245-6967.

Letter Number: 502A00013837

Michelle Hodges Document Specialist

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The n	ame of the Limited Liability Company is:	
	Easy Adult Money, LLC	
The mailing address and street	ARTICLE II - Address: address of the principal office of the Limited Li 6919 W, Broward Blvd #267	iability Company is:
<del></del>		
	Plantation, FL 33324	
		-
	Agent, Registered Office, & Registered Ager e Florida street address of the registered agen	
	Robert Ashley	02 TAL
•	Name	LAH UN T
	792 N. Pine Island Road # <del>205</del> 204	
Florida	street address (P.O. Box NOT acceptable)	
	Plantation, FL 33324	FS C
	City, State, and Zip	ROP TO
the place designated in this certificate capacity. I further agree to comply with	t and to accept service of process for the above stated la e, I hereby accept the appointment as registered agent a the provisions of all statutes relating to the proper and o cept the obligations of my position as registered agent a 608 F.S.	and agree to act in this complete performance of
	Registered Agent's Signature	
The Limited Liabilit and is, t (An additional art	- Management (Check box if applicable.) y Company is to be managed by one manager herefore, a manager - managed company. lete must be added if an effective date is reque	ested)
Signature of a me	ember or an authorized representative of a me	mber.
	408(3), Florida Statutes, the execution of this or penalties of perjury that the facts stated here	
	Typed or printed name of signee	

Filing Fees: \$100 Filing Fee for Articles of Organization, \$ 25 Designation of Registered Agent, \$ 30 Certified Copy (Optional), \$ 5 Certificate of Status (Optional)