

**LA2006014504**



**BENEFIT'S DEVELOPMENT GROUP, LLC**

10 SOUTHEAST FIRST AVENUE, SUITE 201

DELRAY BEACH, FL 33444

(561) 243-9121

FAX (561) 243-1343

City/State/Zip

Phone #

700005557097--5

-05/17/02--01038--003

\*\*\*100.00 \*\*\*100.00

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 #)

FILED  
02 JUN 10 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

☐ 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

700005557097--5

-06/11/02--01112--005

\*\*\*\*\*25.00 \*\*\*\*\*25.00

Examiner's Initials

CR2E031(7/97)

855/676/671

6/11/02



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 22, 2002

LAWRENCE MARINO  
6412 NORTH UNIVERSITY DRIVE STE. 128  
TAMARAC, FL 33321

SUBJECT: ATLANTIC MARKETING GROUP LLC  
Ref. Number: W02000014954

We have received your document for ATLANTIC MARKETING GROUP LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

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) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 502A00033071

FILED  
02 JUN 10 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

ATLANTIC BENEFITS GROUP LLC

## ARTICLE II - Address:

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

6412 NORTH UNIVERSITY DRIVE, TAMANACK FL SUITE 128

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

33321

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

LAWRENCE MARINO

Name

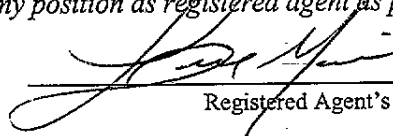
6412 NORTH UNIVERSITY DRIVE STE 128

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

TAMANACK FL 33321

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.*

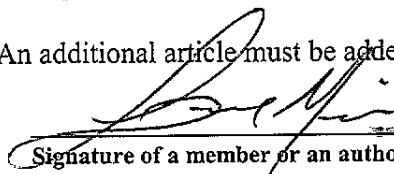


Registered Agent's Signature

## 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)



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.)

LAWRENCE MARINO

Typed or printed name of signee

FILED  
02 JUN 10 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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)