TRANSMITTAL LETTER

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FI	ROM:	EILEEN M. F. Name 3015 No. OCEI FORT LAUDERA City,	Printed or typed) AN BIVI. Address State & Zig	#C106 #C106 #C106 #33308	
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 12, 2002

EILEEN M FARO 3015 N OCEAN BLVD #C106 FT LAUDERDALE, FL 33308

SUBJECT: REVENUE MANAGEMENT CORPORATION

Ref. Number: W02000017101

We have received your document for REVENUE MANAGEMENT CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Heare see attached and process Thank you.

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) 245-6904.

Freida Chesser Corporate Specialist New Filings Section

Letter Number: 002A00038508



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 20, 2002

EILEEN M FARO 3015 NO. OCEAN BLVD., #C106 FORT LAUDERDALE, FL 33308

SUBJECT: REVENUE MANAGEMENT CORPORATION

Ref. Number: W02000017101

We have received your document for REVENUE MANAGEMENT CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are wanting to file as a Florida Limited Liability Company you must complete the attached Articles of Organization. The filing fee will be \$125.00. We will need an additional \$55.00.

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) 245-6913.

Diane Cushing Corporate Specialist

Letter Number: 802A00039943



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 2, 2002

EILEEN M FARO 3015 NO. OCEAN BLVD., #C106 FORT LAUDERDALE, FL 33308

SUBJECT: REVENUE MANAGEMENT CORPORATION LLC

Ref. Number: W02000017101

We have received your document for REVENUE MANAGEMENT CORPORATION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORPORATION." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout 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) 245-6913.

Letter Number: 802A00041775

Diane Cushing Corporate Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: REVENUE MANAGEMENT CORDURATIONS, L.C.C. ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 3015 N. OCEAN BOULEVARD #C-106 FORT LAUDERDALE, FL 33308 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Florida street address (P.O. Box NOT acceptable) 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 \overrightarrow{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.)

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)