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ACCOUNT NO. : 072100000032

REFERENCE: 700678

AUTHORIZATION :?

COST LIMIT :

ORDER DATE: August 12, 2002

ORDER TIME: 9:41 AM

ORDER NO. : 700678-005

CUSTOMER NO: 7137273

CUSTOMER: Eric M. Sauerberg, Esq

Eric M. Sauerberg, P.a.

700007047867--5

Suite 102

200 Village Square Crossing Palm Bch Garden, FL 33410

DOMESTIC FILING

NAME:

RESULTS TRAINING GROUP, LLC

EFFECTIVE DATE:

| <u>xx</u> | ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION | TORRE | 02 AUG | 7.1. |
|-----------|---|-------------|----------|------|
| PLEASE | RETURN THE FOLLOWING AS PROOF OF FILING: | | 12 | H |
| XX | CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | STATE STATE | M 10: 22 | YED |
| CONTACT | PERSON: Susie Knight - EXT. 1156 | | | |

EXAMINER'S INITIALS:

J BRYAN AUG 1 2 2002

ARTICLES OF ORGANIZATION OF RESULTS TRAINING GROUP, LLC

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

ARTICLE I

The name of this limited liability company is Results Training Group, LLC.

ARTICLE II

Malling Parlis This limited liability company shall have perpetual existence from the effective date of fill these Articles with the Department of State unless sooner terminated as provided in the Operating Agreement.

ARTICLE III

The mailing address and street address of the principal place of business of this limited liability company is 4524 Gun Club Road, Suite 101, West Palm Beach, Florida 33415. This limited liability company may, at its discretion, change the address of its principal place of business.

ARTICLE IV

The name and street address of the initial registered agent of this limited liability company is Eric M. Sauerberg, 200 Village Square Crossing, Suite 102, Palm Beach Gardens, Florida 33410.

ARTICLE V

The management of this limited liability company shall be vested in the manager or managers and is, therefore, a manager-managed company.

ARTICLE VI

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the manager.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this day of

| STATE OF FLORIDA |
|---|
| COUNTY OF PALM BEACH The foregoing instrument was acknowledged before me this 5th day of august, 2002, by Steven Smith who is personally known to me or who has produced Florida State Driver's License Number as identification and who did () or did not () take an |
| |
| Executed this 9th day of Gugust, 2002. Signature of Notary Printed Name: My Commission Expires: My Commission Number: |
| |



Eric M Sauerberg

My Commission CC813382

Expires March 1, 2003

CERTIFICATE DESIGNATING REGISTERED OFFICE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

Pursuant to Chapter 608.415 and Chapter 608.507 Florida Statutes, the following is submitted:

That Results Training Group, LLC, a Florida Limited liability company, with its registered office at 200 Village Square Crossing, Suite 102, Palm Beach Gardens, Florida 33410, has named Eric M. Sauerberg at such address as its initial registered agent to accept service of process within this State.

ACKNOWLEDGMENT:

| Having been named regist | | | | |
|-------------------------------------|--------------------|----------------------------|---------------------------------------|----------------|
| liability company at the place des | signated in this C | ertificate, I hereby acc | ept to act in such capac | itv |
| and agree to comply with the app | | | , 1 | |
| and agree to comply with the app | medele provision | or law. | | |
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| COUNTY OF PALM BEACH |) | | · · · · · · · · · · · · · · · · · · · | |
| | | u. | (95) | . % |
| The foregoing instrument | was acknowledge | ed before me this 9^{40} | lay of Mand 300 |) 19 |
| | | | | z e |
| by Eric M. Sauerberg, who is per | sonany known to | _ | | |
| License Number | | _as identification and | who did () or did not (c | <i>Y</i> |
| ake an oath. | | | | |
| W . | Λ | | | |
| Executed this $q^{\gamma r}$ day of | allegent ? | 002 | | |

Printed Name:

My Commission Expires: My Commission Number:

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