

# LD2000026118

## National Telecommuting Institute, Inc.

Specializing in Homebased Training and job Placement for Individuals with Disabilities

September 23, 2002

Dear Sir or Madam,

Enclosed please find an application to register "National Staffing Connection" as a Florida LLC. If you have any questions about this application, please contact me at (415) 389-1703. The best address at which to write to me is:

National Telecommuting Institute  
3 rd floor  
1505 Commonwealth Ave.  
Boston, MA. 02135

Sincerely,



Mary Joan Willard

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-10/03/02--01013--019  
\*\*\*\*\*125.00 \*\*\*\*\*125.00  
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-10/03/02--01013--020  
\*\*\*\*\*30.00 \*\*\*\*\*30.00  
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-10/03/02--01013--021  
\*\*\*\*\*5.00 \*\*\*\*\*5.00

FILED  
2002 OCT -2 AM 9:43  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*a non-profit corporation*

1505 Commonwealth Avenue • Boston, Massachusetts 02135  
Telephone: (617) 787-4426 • Fax (617) 787-3806

J. BRYAN OCT - 4 2002

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

National Staffing Connection LLC

## ARTICLE II - Address:

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

National Staffing Connection LLC  
c/o National Telecommunications Institute 3rd fl.  
1505 Commonwealth Ave.  
Boston, MA 02135

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

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

Beth Miller  
Name  
645 Vassar St.  
Florida street address (P.O. Box NOT acceptable)  
Orlando FL 32804  
City, State, and Zip

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*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..*

*Beth W Miller*

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)

*Mary Joan Willard*

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.)

*Mary Joan Willard*

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)