

L02000027146

September 27, 2002

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

000008352150--0
-10/14/02--01017--005
****130.00 ****130.00

Subject: Madianna Financial, LLC

Enclosed are an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

**\$100.00 Filing Fee for Articles of Organization
25.00 Designation of Registered Agent
5.00 Certificate of Status**

**From James Wells
510 Nantucket Dr.
Tampa, Florida 33617
813 629 3697**

FILED
02 OCT 14 AM 9:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

Madianna Financial, LLC

ARTICLE II – Address:

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

**P.O. Box 340427
Tampa, Florida 33694**

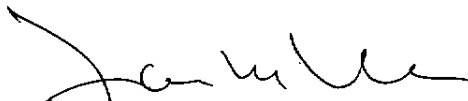
ARTICLE III – Registered Agent

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

**James Wells
510 Nantucket Dr.
Tampa, Florida 33617**

ARTICLE IV – Management:

The Limited Liability Company is to be managed by the members.



Member Signature

In accordance with section 608-408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

James Wells

Signee printed name

Filing Fee: \$100.00

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FLORIDA

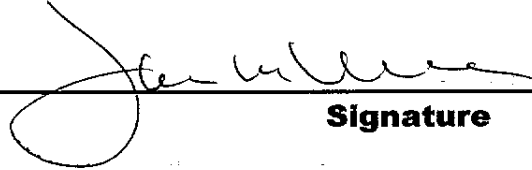
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/ REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTION 608.415 or
608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED
LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO
DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.**

- 1. The name of the limited liability company is: Madianna
Financial, LLC**
- 2. The name and the Florida street address of the registered
agent are:**

**James Wells
510 Nantucket Dr.
Tampa, Florida 33617**

**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 the proper
and complete performance of my duties. I am familiar with and
accept the obligations of my position as registered agent.**



Signature

Filing Fee: \$25.00 for Designation of Registered Agent

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CLERK OF STATE
TALLAHASSEE, FLORIDA