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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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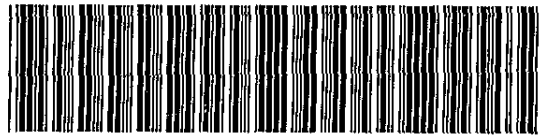
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
02 NOV 12 AM 9:55

11/13

EFFECTIVE DATE

1/1/03

4p

Louis Sparano  
9500 East Plum Harbor Way  
Tamarac, Florida 33321  
Day number 954-474-8080  
Evening number 954-721-3135

11/8/02

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Organization of Limited Liability Company – Sparano & Associates, LLC

To whom it may concern:

Enclosed please find:

- Check for \$125.00 for filing fee and designation of registered agent
- Completed Articles of Organization for Florida Limited Liability Company attaching two additional articles - Article IV for LLC Member Management and Article V for Request for Effective Date

Please note that this LLC will be member managed by myself as noted in Article IV attachment and the effective start date for LLC is 1/1/03 per attached Article V.

Please process and forward your letter of acknowledgment confirming completion of organization.

Please feel free to call me with any questions at 954-474-8080.

Thank you

  
Louis Sparano

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: Sparano & Associates, LLC

## ARTICLE II - Address:

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

9500 East Plum Harbor Way  
Tamarac, FL 33321

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

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

Louis Sparano

Name

9500 East Plum Harbor Way

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

Tamarac, 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.*

Louis Sparano

Registered Agent's Signature

(An additional article must be added if an effective date is requested) ✓

Louis Sparano

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.)

Louis Sparano

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)

**EFFECTIVE DATE**  
11/1/03

**ARTICLE IV – LLC Management by Manager:**

The Limited Liability Company shall be member managed by member Louis Sparano.  
Mr. Sparano's address/phone:

9500 East Plum Harbor Way  
Tamarac, Florida 33321  
(954) 721-3135

**ARTICLE V – Effective Date:**

Effective date of Limited Liability Company shall be January 1, 2003.

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