

## Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Phone Fax Number : (305)633-9696

# **BOOMERANG MARKETING PARTNERS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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## ARTICLES OF ORGANIZATION OF BOOMERANG MARKETING PARTNERS, LLC

Article I. Name.

The name of the limited liability company is:

#### BOOMERANG MARKETING PARTNERS, LLC

Article II. Address.

The mailing address and the street address of the principal office of the limited liability company is:

7502 Appalachian Lanc Parkland, FL 33067

Article III. Registered Agent, Registered Office & Registered Agent's Signature.

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

Richard A. Josepher 2101 Corporate Blvd., Suite 107 Boca Raton, FL 33431

Having been named as registered agent 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 that 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 under Chapter 608, F.S..

RICHARD A. JOSEPHER

Registered Agent's Signature

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### Article IV. Management (check as applicable)

Χ,	The Limited Liability Company is to be managed by one or more managers and is therefore, a manager-managed company.
	The Limited Liability Company is to be managed by its members, and is therefore a member-managed company.
	Signature of member or an authorized representative of a member
	SISTINGUE ON WENDER OF BIT NOTIFY INC. 1 CHICAGO OF A INCLINE.

(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.)

RICHARD A JOSEPHER

Member or Authorized Representative of a Member of
Typed or Printed Name of Signee

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