Division of Corporations

Florida Department of State

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IVISION OF CORPORATION

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LIMITED LIABILITY COMPANY

Femillionaires, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Audit # H03000119672 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name and Address

The name of this Limited Liability Company is:

Femillionaires, LLC

The mailing address and street address of the Limited Liability Company are:

P.O. Box 915115 Longwood, FL 32791

ARTICLE II Term of Existence

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

ARTICLE III Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

ARTICLE IV

Powers

The Limited Liability Company shall have the powers granted to a Limited Liability.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3249 W Cypress St., Suite C. Tampa, FL 33607, (813)-875-1333.

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Date: 4/16/03 Time: 4/46/45 AM

Audit # H03000119672

ARTICLE V Initial Registered Office and Avent

The street address of the initial registered office of this Limited Liability Company is:

\$12 Sweetwater Club Blvd. Longwood, FL 32779

and the name of its registered agent at such address is:

Dr. Florence Alexander

ARTICLE VI Management

This Limited Liability Company shall have One manager(s), and is therefore, a managermanaged Company. The name and address of the manager(s) are:

Name and Address

Dr. Florence Alexander P.O. Box 915115 Longwood, FL 32791

Dated: Tuesday, April 15, 2003

Lovens alexander

APR 16 2003 9:03AM 04/18/2003 08:59 FAX rmm white 10:07 From the Alexander

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Date: 4/16/03 Time: 8:46;48 AM

2003 Page 4 of 4

Audit # H03000119672

ACCEPTANCE BY REGISTERED AGENT

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.

Date: April 15, 2003

Dr. Florence Alexander

93 APP 16 AM II: 04 SECRLIARY OF STATE