

L03000028236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/30/03--01011--003 **155.00

RECEIVED
03 JUL 30 AM 9:51
STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Handwritten signature

FILED
03 JUL 30 AM 7:53
STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 30, 2003

CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: P.O.M. FINANCIAL SOLUTIONS, LLC
Ref. Number: W03000021488

FILED
03 JUL 30 AM 7:53
TALLAHASSEE, FLORIDA

RECEIVED
03 JUL 31 PM 3:07
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for P.O.M. FINANCIAL SOLUTIONS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

If your intention is to form a CORPORATION, then you cannot use the suffix "LLC" in the name. You would have to use INC., INCORPORATED, CORPORATION, or CORP. And you have OVERPAID the filing fees.

If your intention is to form a LIMITED LIABILITY COMPANY, then you have paid the correct fee and used the correct suffix, but you have SUBMITTED THE WRONG DOCUMENT.

To form a limited liability company, you file ARTICLES OF ORGANIZATION. This document cannot make any references to a "corporation" or to "shares of stock" or to "incorporators" or to "bylaws" or to "Chapter 607", which is the corporation law.

You may use our attached form, or you may draw up your own document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: P.O.M. Financial Solutions, LL

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2650 Biscayne Blvd
Miami, FL 33137

2650 Biscayne Blvd
Miami, FL 33137

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

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

Neal Sandberg
Name

2650 Biscayne Boulevard
Florida street address (P.O. Box NOT acceptable)

Miami, FL 33137
City, State, and Zip

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STATE
TREASURER
FLORIDA

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.,

[Signature]
Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Name and Address:

Neal Sandberg

2450 Biscayne Blvd

Miami, FL 33137

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

Neal Sandberg

Typed or printed name of signer

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)

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03 JUL 30 AM 7:53
CLERK OF DISTRICT COURT
MIAMI, FLORIDA