

L03000029289

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

DIVISION OF CORPORATION

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LIMITED LIABILITY COMPANY

The Exponent Group, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Handwritten signature/initials

FAX AUDIT # 4030002484720

**ARTICLES OF ORGANIZATION
OF
The Exponent Group, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **The Exponent Group, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 5005 Collins Avenue, Suite 608, Miami Beach, Florida 33140.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 660 East Jefferson Street, Tallahassee, Florida 32301. Located in the County of Leon.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2043.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the names and addresses of the managers of the Limited Liability Company are:

Frank Natoli, 5005 Collins Ave., 608, Miami Beach, Florida 33140
Albert Gonzalez, 168 Herman Blvd., Franklin Square, New York 11010-2732


Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
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AUG-07-2003 14:59

P.03/03

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

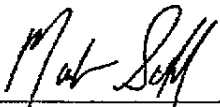
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **The Exponent Group, LLC**

The name and address of the registered agent and office is: Business Filings Incorporated,
660 East Jefferson Street, Tallahassee, Florida 32301. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above
stated 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.

Signature: _____


Mark Schiff, AVP
Business Filings Incorporated

Date: August 6, 2003

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STATE OF FLORIDA
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