

LO3 0000 34439

(Requestor's Name)

Boraike
2605 Herndon St
Valrico, FL 33594

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

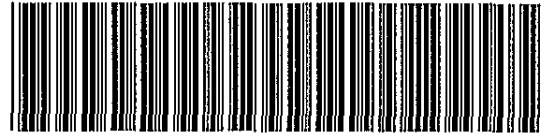
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100022710461

09/09/03--01082--002 **125.00

FILED
03 SEP -9 11 12:17
FBI - TAMPA

LO3-34439
AL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Credential Services, LLC

ARTICLE II - Address:

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

Principal Office Address:

2605 Herndon Street

Valrico, FL 33594

Mailing Address:

2605 Herndon Street

Valrico, FL 33594

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

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

George R. Boraiko

Name

2605 Herndon Street

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

Valrico, FL 33594

FL

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..



Registered Agent's Signature

(CONTINUED)

RECEIVED
03 OCT -2 P112:57
HCHS-11 STATE
SECRET FL 0005

FILED

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

Name and Address:

MGRM	George R. Boraiko
	2605 Herndon Street
	Valrico, FL 33594
MGRM	Bill Webb
	2545 Hilliard-Rome
	Hilliard, Ohio 430226-9471

(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.)

George R. Boraiko

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)

09/27/00 14:12:17
STATE OF FLORIDA
4177