

L03 000039753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

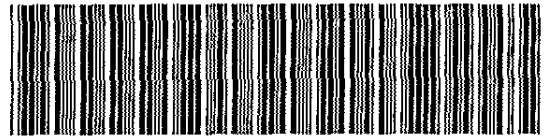
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/09/03--01059--020 **160.00

EFFECTIVE DA
10-10-03

L03-39753
OR

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BrainLenders Consulting, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Russell Tooker

(Name of Person)

BrainLenders Consulting, LLC

(Firm/Company)

3580 N.E. 31st Avenue

(Address)

Lighthouse Point, FL 33064

(City/State and Zip Code)

For further information concerning this matter, please call:

Russell Tooker

(Name of Person)

at (954) 895-3313

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
BrainLenders Consulting, LLC

ARTICLE II - Address:

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

Principal Office Address:

3580 N.E. 31st Avenue
Lighthouse Point, FL 33064

Mailing Address:

3580 N.E. 31st Avenue
Lighthouse Point, FL 33064

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

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

Russell E Tooker

Name

3580 N.E. 31st Avenue

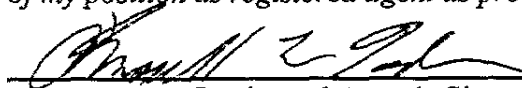
Florida street address (P.O. Box NOT acceptable)

Lighthouse Point, FL 33064

City, State, and Zip

EFFECTIVE DATE
10-10-03

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)

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

Russell Tooker

3580 N.E. 31st Avenue

Lighthouse Point, FL 33064

MGRM

Tanya Tooker

3580 N.E. 31st Avenue

Lighthouse Point, FL 33064

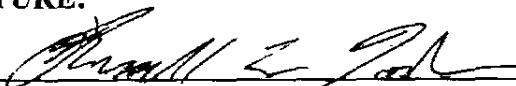
ARTICLE V – Form of Management:

The Limited Liability Company is to be managed by one manager or more managers and is, therefore a manager – managed company.

ARTICLE VI – Requested Effective Date:

Effective Date requested to be 10/10/2003

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.)

Russell E Tooker

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)