

L040000002562

(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



600025860916

01/05/04--01025--005 **160.00.

FILED
2004 JAN -5 PM 2:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN JAN 9 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida CREDIT SOLUTIONS LLC
(Name of Limited Liability Company)

FILED
2004 JAN -5 PM 2:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

HARRY KLAUSNER
(Name of Person)

HARRY KLAUSNER ESQ
(Firm/Company)

PO Box 07279
(Address)

FT Myers Fla 33914
(City/State and Zip Code)

For further information concerning this matter, please call:

HARRY KLAUSNER at (239) 498-0550
(Name of Person) (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**

FILED
2004 JAN -5 PM 2:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIDA CREDIT SOLUTIONS LLC

ARTICLE II - Address:

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

Principal Office Address:

800 DOUGLES ROAD
NORTH TOWER STE 450
CORAL GABLES FLA 33134

Mailing Address:

800 DOUGLES ROAD
NORTH TOWER STE 450
CORAL GABLES FLA 33134

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

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

HARRY KLAUSNER

Name

20961 ISLAND SOUND CIRCLE UNIT 101

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

ESTERO

FLORIDA

33928

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, Florida Statutes..



Registered Agent's Signature

FILED
2004 JAN -5 PM 2:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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:

MGR

JOE ROSEN

~~800 DOUGLES ROAD NORTH TOWER STE 450~~
~~CORAL GABLES FLA 33134~~

MGR

ROY CUBERO

800 DOUGLES ROAD NORTH TOWER STE 450
CORAL GABLES FLA 33134

MGR


HARRY KLAUSNER

~~20961 ISLAND SOUND CIRCLE UNIT 101~~
~~ESTERO FLA 33928~~

(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.)

HARRY KLAUSNER

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)