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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2004 MAR 22 P 3: 10

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 22, 2004

SALVATORE AMOROSO JR. 2303 89TH ST. NW BRADENTON, FL 34209

SUBJECT: BRAIN RESEARCH ADVOCATES INFORMATION NETWORK

(B.R.A.I.N.)

Ref. Number: W04000011357

We have received your document for BRAIN RESEARCH ADVOCATES INFORMATION NETWORK (B.R.A.I.N.) and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 004A00018627

TRANSMITTAL LETTER

FILED

TO: Registration Section Division of Corporations

2004 MAR 22 P 3: 10

SUBJECT: Brain Research Advocates Information Network (B.R.A.I.N.) (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:

Salvatore Amoroso	lr.
<u> </u>	(Name of Person)
Brain Research Advoca	tes Information Network (B.R.A.I.N.)
	(Firm/Company)
2303 89th st. NW	
	(Address)
Bradenton, Florida	34209
	(City/State and Zip Code)
or further information concerning this	matter, please call:
Salvatore Amoroso Jr.	at (941) 792-6973

STREET ADDRESS:

(Name of Person)

For

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

(Area Code & Daytime Telephone Number)

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

ARTICLES OF ORGANIZATION FOR

FILED

FLORIDA LIMITED LIABILITY COMPANYIII HAR 22 P 3: 10

ARTICLE I - Name:	TALLAHASSEE, FLORIDA
The name of the Limited Liability Company is:	- Loning
Brain Research Advocates Information Network (B.R.A.I.N.), LLC
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2303 89th st. NW Bradenton, Fl. 34209	2303 89th st. NW Bradenton, Fl. 34209
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register	
Salvatore Amoroso Jr.	
Name	
2303 89th st. NW	
Florida street address (P.O. Box]	NOT acceptable)
Bradenton F	LORIDA 34209
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

Page 1 of 2 (CONTINUED)

FILED ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: 2004 MAR 22 P 3: 10 Title: Name and Address: "MGR" = Manager SECRETARY OF STATE TALLAHASSEE, FLORIDA "MGRM" = Managing Member MGR Salvatore Amoroso Jr. 2303 89th st. NW Bradenton, Fl. 34209 (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.

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)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

that the facts stated herein are true.)

Salvatore Amoroso Jr.