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(Re	equestor's Name)	·
(Ad	dress)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	***************************************
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		8/19.8
	Office Use Onl	Y CINX



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Anwar Shanata 2550 NW 42nd Place Gainesville, Florida 32605

Tel. 352-262-7777

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TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: FOCUS Market	ing International. LC			
(Name of L	imited Liability Company)			
The enclosed Articles of Organization and fee(s) are	e submitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Anwah Shanata (Name of Person)				
Focus Marketing Inter	national:LC			
2550 NW 42 Place				
Gaines ville FLORIDE (Cit)/State and Zip Code)	232605	en orde Stephen eff	0	
For further information concerning this matter, plea	se call:		I DITY YI	100° 7878 2 ∰ 71604⊈
Anwar Shanata (Name of Person)	at (352 262-7777 (Area Code & Daytime Telephone Number)	AHASSEB FLORID	4:1 H4 8	
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	LORIDA	£	المسا

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FOCUS MarketING InterNATIONAL. 1C

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
2550 NW 42 Place Gainesuille, Florida	SAME	

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

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

Anuar Shanata
Name
2550 NW 42nd Place
Florida street address (P.O. Box NOT acceptable)
Gainesuille FL 32605
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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manage: "MGRM" = Manage:		Name and Address:	
MGR	_	Anwar Shanata 2550 NW 42 Place BANI, FL 32605	
	_		
(Use attachment if	necessary)		ALL
•	• ,	added if an effective date is requested.	AHÁSS
REQUIRED SIG	NATURE:		
	Signature of a member of	or an authorized representative of a member.	MORIDA
	of this document constituent that the facts stated hereing	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury are true.) Shanata d or printed name of signee	
	5	Filing Fees: 6100.00 Filing Fee for Articles of Organization 5 25.00 Designation of Registered Agent 6 30.00 Certified Copy (Optional) 6 5.00 Certificate of Status (Optional)	