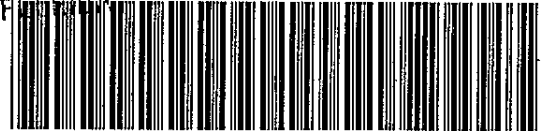


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2004 AUG 19 P 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



600040256846

08/19/04--01024--010 \*\*130.00

(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:

AL

Office Use Only

# LAW OFFICE OF ROBERT L. SHEAR, P.A.

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Robert L. Shear  
Attorney-at-Law  
lawshear@aol.com

**FILED**

Judy Murray  
Certified Legal Assistant  
law.shear@verizon.net

August 17, 2004

2004 AUG 19 P 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

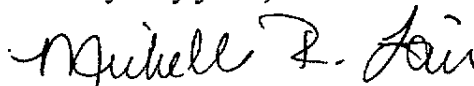
Re: Promotional Services, LLC

To Whom It May Concern:

Enclosed you will find Articles of Organization for Florida Limited Liability Company for the above referenced corporation. Please process these Articles at your earliest convenience. This is being done by mail because the website was finding an error in your records with the credit card we tried to use.

If you have any questions do not hesitate to contact this office.

Very truly yours,



Michelle R. Fair  
Legal Assistant

/mf

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Promotional Seviles, LLC  
(Name of Limited Liability Company)

**FILED**

2004 AUG 19 P 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

Robert L. Shear  
(Name of Person)

Robert L. Shear, P.A.  
(Firm/Company)

2650 McCormick Dr., Suite 130  
(Address)

Clearwater, FL 33759  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert L. Shear, Esq. at ( 727 ) 712-1228  
(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 AUG 19 P 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Promotional Services, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

2678 McMullen Booth Rd.

Suite 814

Clearwater, FL 33761

**Mailing Address:**

2678 McMullen Booth Rd.

Suite 814

Clearwater, FL 33761

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

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

Robert L. Shear

Name

2650 McCormick Dr., Suite 130

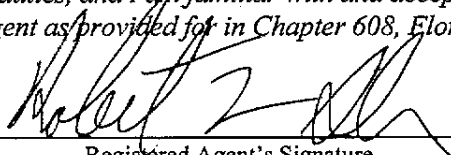
Florida street address (P.O. Box **NOT** acceptable)

Clearwater

FLORIDA 33759

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

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

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

**FILED**

2004 AUG 19 P 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Aicha Benkour

8023 Tyson Oaks Circle

Vienna, VA 22182

MGR

William H. Hood

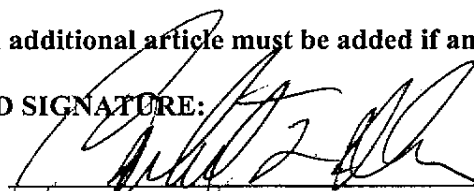
2895 Fairgreen Dr.

Clearwater, FL 33761

(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.)

Robert L. Shear

Typed or printed name of signer

- 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)