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2004 SEP 18 P 2:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Professional Wealth Management  
& Financial Services

7651-C Ashley Park Court  
Suite 411  
Orlando, FL 32835  
(407) 295-6559 Phone  
(407) 654-8623 Fax

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Bruce Gentilella, President  
Mel Brandenburg, Assistant

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 3, 2004

Division of Corporations  
ATTN: Registration Section  
409 E. Gaines St.  
Tallahassee, FL 32399

Re: Limited Liability Company

To Whom It May Concern:

Please find the enclosed Articles of Organization, Transmittal Letter, and check made payable to the Florida Department of State in the amount of \$125.00. The address for my new company, East Coast Financial Solutions, LLC will be 10418 Windermere Chase Blvd. Gotha, FL 34734.

Please give me a call if you have any questions or concerns at (321) 299-4973.

Sincerely,

A handwritten signature in black ink, appearing to read "Bruce Gentilella", written over a horizontal line.

Bruce Gentilella

**TRANSMITTAL LETTER**

**FILED**

**TO:** Registration Section  
Division of Corporations

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**SUBJECT:** East Coast Financial Solutions, LLC  
(Name of Limited Liability Company)

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:

Bruce Gentilella

(Name of Person)

East Coast Financial Solutions, LLC

(Firm/Company)

10418 Windermere Chase Blvd.

(Address)

Gotha, FL 34734

(City/State and Zip Code)

For further information concerning this matter, please call:

Mel Brandenburg

(Name of Person)

at ( 407 )

295-6559

(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**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

East Coast Financial Solutions, LLC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II - Address:**

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

**Principal Office Address:**

10418 Windermere Chase Blvd.

Gotha, FL 34734

**Mailing Address:**

10418 Windermere Chase Blvd.

Gotha, FL 34734

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

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

Bruce Gentilella

Name

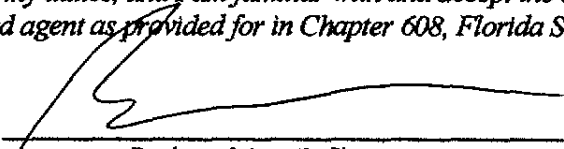
10418 Windermere Chase Blvd.

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

Gotha, FLORIDA 34734

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**

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

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MGR

Bruce Gentilella

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10418 Windermere Chase Blvd.

Gotha, FL 34734

MGR

Thomas Leonard

229 Crown Prince Dr.

Evesham, NJ 08053

(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.)

Bruce Gentilella

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)