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TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: DIVERSIFIED FAITH MANAGEMENT, LLC		
(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:		
Theresa Louise Mulligan		
(Name of Person)		
(Firm/Company)		
3209 Meta Court		
(Address)		
Largo, FL 33771 (City/State and Zip Code)		
(Origination and Elip Good)		
For further information concerning this matter, please call:		
John Schnackel, Attorney at (727) 204-0808 (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

The name of the Limited Liability Company is:	
DIVERSIFIED FAITH MANAGEMENT, LLC	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3209 Meta Court	3209 Meta Court
Largo, FL 33771	Largo, FL 33771
ARTICLE III - Registered Agent, Registered	
The name and the Florida street address of the re-	1
Dilip Patel, P.A.	2 1
Name	
2963 Gulf to Bay Blvd., Suite 20	O8, Water's Edge Office Center Box NOT acceptable)
Florida street address (P.O.	Box NOT acceptable)
Clearwater	FLORIDA 33759
City, State, an	ıd 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)

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" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Theresa Louise Mulligan 3209 Meta Court Largo, FL 33771
(Use attachment if necessary)	
NOTE: An additional article must be REQUIRED SIGNATURE	
Signature of a member or an au (In accordance with section 608.	Authorized representative of a member. 408(3), Florida Statutes, the execution ffirmation under the penalties of perjury ie.)

Theresa Louise Mulligan

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)