# L04000092494

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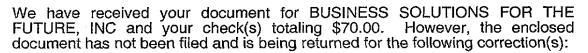
#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 22, 2004

JONATHAN MOGOR 6055 SPRING ISLES BLVD. LAKE WORTH, FL 33463

SUBJECT: BUSINESS SOLUTIONS FOR THE FUTURE, INC

Ref. Number: W04000042804



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of 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) 245-6995.

Wanda Cunningham
Document Specialist
New Filings Section

Letter Number: 104A00066161

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## TRANSMITTAL LETTER

| \$   |  |  |  |  |
|--|--|--|--|--|
|  | TRANSMITTAL LETTER   |  |  |  |
|  | TRANSMITTAL LETTER  TO: Registration Section Division of Corporations  SUBJECT: BUSINESS Solutions For the Future CLC Together Subjects and Subjects are subjected by the subject of the s |  |  |  |
| ,  | SUBJECT: Business Solutions For the Future CLC Ton (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:  |  |  |  |
|  | JONATHAN MOGOT (Name of Person)  |  |  |  |
|  | BUSINESS SOLUTIONS FOR THE FUTURE (Firm/Company)   |  |  |  |
|  | 6055 SPring Isles Blud (Address)   |  |  |  |
|  | LAHE Worth FL 33463 (City/State and Zip Code)  |  |  |  |
| For further information concerning this matter, please call: |  |  |  |  |
|  | Name of Person) at (56/) 963 2748  (Area Code & Daytime Telephone Number)  |  |  |  |
| Enclose  | ed is a check for the following amount:  |  |  |  |
| <b>)8</b> 1 \$125  | 5.00 Filing Fee  \$\Bigcup \\$130.00 Filing Fee &  \Bigcup \\$155.00 Filing Fee &  \Bigcup \\$160.00 Filing Fee,  Certificate of Status  |  |  |  |

#### STREET ADDRESS:

**X** \$12

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

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

| Business Solutions For T   | he FUTURE LLC                                |
|--|--|
| ARTICLE II - Address: The mailing address and street address of the principal o  | office of the Limited Liability Company is:  |
| Principal Office Address:  | Mailing Address:                             |
| 6055 SPring Isles Blud<br>LAKE WORK FL 33463   | 6055 Spring Isles Blud<br>LAKE WOLM FL 33463 |
| ARTICLE III - Registered Agent, Registered Office,  The name and the Florida street address of the registered  ONATHAN MOGOL  Name  6055 SPING TSIE.  Florida street address (P.O. Box NO  LAHE WOM FL  City, State, and Zip | ARE      |

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):

Title:

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

Name and Address:

| "MGR" = Manager                     |  |  |  |
|-------------------------------------|--|--|--|
| "MGRM" = Managing Member            |  |  |  |
| Mai?                                | JONATHAN MOGOR   |  |  |
| 31-                                 | 6055 Spring Files Blud   |  |  |
|                                     | LAME WORD FL 33467   |  |  |
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| NOTE: An additional article must be | added if an effective date is requested.   |  |  |
| REQUIRED SIGNATURE:                 |  |  |  |
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|                                     | and the second second  |  |  |
| -/0/                                | 1  |  |  |
| Signature of a member               | or an authorized representative of a member.   |  |  |
| of this document constitu           | (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.) |  |  |
| JONAMAN M                           | 0905   |  |  |
| Туро                                | ogor<br>ed 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)