

Feb. 23. 2005 1:51 PM

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No. 205 P&P. 1/31

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800) 342-9856
Fax Number : (800) 354-3381

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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LIMITED LIABILITY COMPANY

ALL FOUR LEARNING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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DIVISION OF CORPORATIONS

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALL FOUR LEARNING, LLC

ARTICLE II - Address:

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

Principal Office Address:

c/o PATRICK CAMPOLO
2890 NW 28th TERRACE
BOCA RATON, FL 33434

Mailing Address:

c/o PATRICK CAMPOLO
2890 NW 28th TERRACE
BOCA RATON, FL 33434

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

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

PATRICK CAMPOLO

Name

2890 NW 28th TERRACE

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

BOCA RATON, FL 33434

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

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

LEONARD FUCILE
285 LEXINGTON AVENUE
OCEANSIDE, NY 11572

MGRM

ANDREW VIDRA
3282 JASON DRIVE
BELLMORE, NY 11710

MGRM

PATRICK CAMPOLO
2890 NW 28th TERRACE
BOCA RATON, FL 33434

JOHN SCURTI

JOHN SCURTI
26 CONCORD DRIVE
NEW CITY, NY 10956

(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.)

JOAN M. GRAHAM

Typed or printed name of signee

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