

65000044547

Elo McCalla

(Requestor's Name)

3399 Foxcroft Rd.

(Address)

#106

(Address)

Miramar, FL 33006

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Certificates of Status

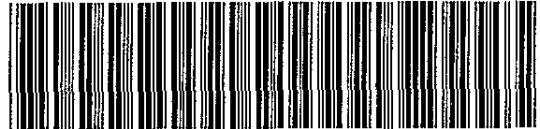
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MJH

05 MAY -4 PM 2:57

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

SIX STEPS HOLDINS L.L.C.

### ARTICLE II - Address:

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

#### Principal Office Address:

9965 MIRAMAR PARKWAY #293  
MIRAMAR FL 33025

#### Mailing Address:

9965 MIRAMAR PARKWAY #293  
MIRAMAR FL 33025

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

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

FLO McCALLA

Name

3399 FOXCROFT ROAD #105

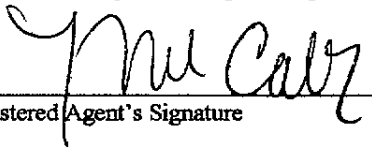
Florida street address (P.O. Box **NOT** acceptable)

MIRAMAR FL 33025

FL

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

(CONTINUED)

05 MAY -11 PM 2:57

**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

FLO McCALLA

3399 FOXCROFT ROAD # 105

MIRAMAR, FL 33025

MGRM

BEVERLY GEORGE-JORDAN

3 WARWICK COURT

NEWTOWN, PA 18940

MGRM

MOREY WRIGHT

7667 WEST SAMPLE ROAD

CORAL SPRINGS, FL 33065

(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.)

FLO McCALLA

Typed or printed name of signee

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation  
of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**

**ARTICLE IV – Manager(s) or Managing Members(s)**

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

**MGRM                      ALTHEA RUSSELL  
526 NW 158<sup>TH</sup> LANE  
PEMBROKE PINES, FL 33028**

**MGRM                      PAUL McCORMACK  
5709 TUSCANY TERRACE  
TAMARAC, FL 33321**

**MGRM                      JOSEPH MONDELLI JR.  
7891 WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33056**