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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
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'CAPITAL CONNECTION, INC.

 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301

 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Steel	Fidelity	Trust LL

ALCHANGER, PLOMBA

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		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
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		Certificate of Good Standing
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		Corp Record Search
		Officer Search
		Fictitious Search
		Fictitious Owner Search
Signature		Vehicle Search
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:	AR	TI	\mathbf{CI}	Æ	I	<u>-</u> [Vam	e:
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The name of the Limited Liability Company is:

Steel Fidelity Trust, LLC

ARTICLE II - Address:

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

Principal Office Addr	ress:	Mailing Address:
2328 Tenth Avenue North	1	2328 Tenth Avenue North
Suite 403		Suite 403
Lake Worth, Florida 3346	31	Lake Worth, Florida 33461
The name and the Flori	da street address of the registere	, & Registered Agent's Signature: d agent are:
Kog	jer B. Rukin Name	
232	8 Tenth Avenue North, Suite 403 Florida street address (P.O. Box NO	OT acceptable)
Lak	e Worth FL0 City, State, and Zip	ORIDA 33461

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	James B. Rukin
	2328 Tenth Avenue North, Suite 403
	Lake Worth, Florida 33461
MGRM	Julia R. Rukin
	2328 Tenth Avenue North, Suite 403
	Lake Worth, Florida 33461
MGR	Roger B. Rukin
	2328 Tenth Avenue North, Suite 403
	Lake Worth, Florida 33461
 · ·	
(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.)

James B. Rukin Revocable Trust U/A/D 5/7/96

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)