

Florida Department of State  
Division of Corporations  
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## From:

Account Name : RAPPEL & RAPPEL, P.A.  
Account Number : 076043001611  
Phone : (772) 778-8885  
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DIVISION OF CORPORATION

## LIMITED LIABILITY COMPANY

ClaimHelpers.com, L.L.C.

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

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TALLAHASSEE, FLORIDA

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Electronic Filing Manual

Corporate Filing

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**ARTICLES OF ORGANIZATION  
OF  
CLAIMHELPERS.COM, L.L.C.**

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**ARTICLE I  
NAME**

The name of the Limited Liability Company ("Company") is  
**CLAIMHELPERS.COM, L.L.C.**

**ARTICLE II  
PRINCIPAL PLACE OF BUSINESS**

The principal place of business and mailing address of the Company is 745 Sabrina Terrace SW, Vero Beach, Florida 32968 or such a place as may be designated by the Members.

**ARTICLE III  
REGISTERED AGENT AND ADDRESS**

The Registered Agent of the Company is DEC Consultants, Inc., and the address of the Registered Agent is 1515 Indian River Boulevard, Suite A 210, Vero Beach, Florida 32960-7103.

**ARTICLE IV  
PURPOSE**

The purpose and character of the Company is to sell subscriptions for on-line services and to acquire, invest in, own, maintain, repair, lease, sell and otherwise use property and equipment in the performance of those services and other personal property related or incidental thereto, and in connection with this purpose, and other activities related or incidental thereto, including without limitation, the borrowing of funds and the granting of security interests in its property. The Company shall have all powers granted to Limited Liability Companies under Florida Law.

**ARTICLE V  
DURATION**

The Company shall perpetually continue in full force and effect from the date of filing these Articles of Organization with the Secretary of State, or until dissolution prior thereto pursuant to the provisions hereof and upon filing of Articles of Dissolution with the Secretary of State pursuant to Florida Statutes 608.441.

**ARTICLE VI  
MANAGEMENT**

The Company shall be managed by its Members in proportion to their Sharing Ratios (herein so called) of each initial Member as set forth in the Operating Agreement for the Company, and as

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Florida Bar No.:0015156

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adjusted from time to time to reflect the Sharing Ratios of any additional Members; provided, however, that the Members may, by revising the operating agreement, provide for the management of the Company by the Members in a manner disproportionate to the Members' Sharing Ratios adjusted as hereinabove set forth. The Managing Members of the Company and their addresses are:

<u>NAME</u>	<u>ADDRESS</u>	<u>SHARING RATIO</u>
Brian R. Tracy	745 Sabrina Terrace, SW Vero Beach, Florida 32968	50%
Patrick A. Paradise	145 43 <sup>rd</sup> Court Vero Beach, Florida 32968	50%

#### ARTICLE VII ADDITIONAL MEMBERS

Additional Members may be admitted to the Company only upon the unanimous vote of the existing Members. New Members may be admitted upon such terms and conditions as the existing Members may determine.

#### ARTICLE VIII DISSOLUTION

In the event of the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or upon the occurrence of any other event of dissolution as the Members may specify by regulation or operating agreement, which terminates the continued membership of a Member in the Company, the Company shall be dissolved unless within thirty (30) days after such event, unless the remaining Members agree in writing to continue the business of the Company.

#### ARTICLE IX INDEMNIFICATION

The Company shall, to the fullest extent permitted by law, be entitled to indemnify and Member for any liability incurred in connection with any action, if such Member acted in good faith and in a manner it reasonably believed to be in furtherance of, or not opposed to, the best interests of the Company. The Company shall indemnify any person who is or was a party, or who is threatened, pending, or completed action, suit or proceeding, whether civil, criminal, administrative or investigative, including all appeals, by reason of the fact that he is or was a Member, Managing Member or employee of the Company, or is or was serving at the request of the Company as a director, trustee, officer or employee of another limited liability company, corporation, partnership, joint venture, trust or other enterprise, against any and all expenses (including reasonable attorneys' fees), judgments, decrees, fines, penalties and amounts paid in settlement, which were actually and reasonably incurred by him or her in connection with such action, suit or proceeding, if he or she acted in good faith and in a manner which he or she reasonably believed to be in, or at least not opposed to, the best interests of the Company, and with respect to any criminal action or proceeding, if he or she had no reasonable cause to believe his or her conduct was unlawful. The termination of any action, suit or proceeding by judgment, order, settlement conviction, or plea of nolo contendere or its equivalent shall not, of itself, create a presumption that the person did not act in good faith and in a manner which he reasonably believed to be in, or at least not opposed to the best interests of the Company.

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**CERTIFICATE OF DESIGNATING PLACE OF BUSINESS OR  
DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS  
STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

Pursuant to the Provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the Registered Office/Registered Agent in the State of Florida.

1. The name of the Limited Liability Company is:  
  
ClaimHelpers.com, L.L.C.
2. The name and address of the registered agent and office is:  
  
DEC Consultants, Inc.  
1515 Indian River Boulevard  
Suite A 210  
Vero Beach, Florida 32960-7103

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.

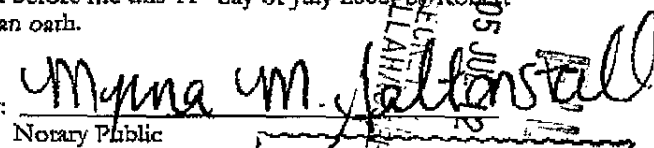
By:   
Robert Rappel, President

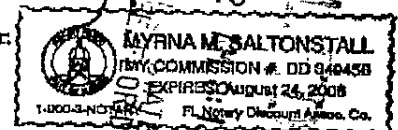
Dated: July 11, 2005

STATE OF FLORIDA )

COUNTY OF INDIAN RIVER )

The foregoing instrument was acknowledged before me this 11<sup>th</sup> day of July 2005 by Robert Rappel who is personally known to me and who did not take an oath.

By:   
Notary Public  
Commission Number:



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