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M. HODGES

To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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TALLAHASSEE FLORIDA

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DIVISION OF CORPORATION

**LIMITED LIABILITY COMPANY**

**em power recruiting, llc**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION****FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name of Limited Liability Company : **EM POWER RECRUITING, LLC**

ARTICLE II - Mailing Address &amp; Street Address of Limited Liability Company:

Address: **8181 NW 154<sup>TH</sup> STREET, STE 270**City, State & Zip: **MIAMI LAKES, FL 33016**

ARTICLE III - Registered Agents Name, Office Address, &amp; Registered Agents Signature:

**SHANE FOSTER**

Name

**2455 NW 89<sup>TH</sup> DRIVE**

Address (P.O. Box NOT Acceptable)

**CORAL SPRINGS, FL 33065**

City, State, 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

Date 09/02/2005

- ☐ Article IV - Management (Check box if applicable.)  
☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. Specify name & address(es).

1.

2.



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.

**SHANE FOSTER**

Typed or printed name of signee

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