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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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105-100474  
CR

October 7, 2005

Florida Department of State  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Subject: Filing – The Language of Law, LLC

To Whom It May Concern:

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

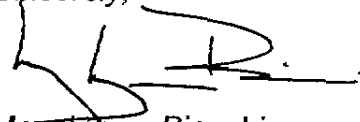
Mary Lynne Bianchi  
The Language of Law, LLC  
2620 Wilson Blvd. North  
Naples, FL 34120

For further information concerning this matter, please call:  
Mary Lynne Bianchi at 239-340-1944

Enclosed is a check for the following amount:

☒ \$160.00 filing fee  
Certificate of Status & Certified copy

Sincerely,

  
Mary Lynne Bianchi

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TALLAHASSEE, FLORIDA

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**Articles of Organization  
For  
Florida Limited Liability Company  
The Language of Law, LLC**

**ARTICLE I – Name:**

The name of the Limited Liability Company is: **The Language of Law, LLC.**

**ARTICLE II – Address:**

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

**2620 Wilson Blvd. North  
Naples, FL 34120**

**ARTICLE III – Duration:**

The Limited Liability Company shall dissolve no later than December 31, 2070.

**ARTICLE IV – Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing members(s) is/are:

**Mary Lynne Bianchi  
2620 Wilson Blvd. North  
Naples, FL 34120**

**ARTICLE V – Members Right to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

  
\_\_\_\_\_  
**Mary Lynne Bianchi, Organizer**

(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).

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.416 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: **The Language of Law, LLC.**
2. The name and the Florida street address of the registered agent is:

**Mary Lynne Bianchi  
2620 Wilson Blvd. North  
Naples, FL 34120**

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.

  
\_\_\_\_\_  
**Mary Lynne Bianchi, Registered Agent**

Filing fee: \$25 for Designation of Registered Agent

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TALLAHASSEE, FLORIDA

**FILED**