

LOS000121758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

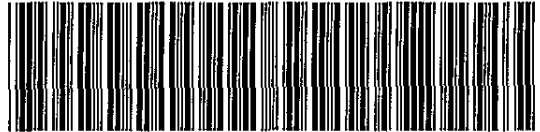
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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LOS-121758  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2005

ODEMARIS MENDOZA  
1021 SHIMMERING SAND DRIVE  
OCOEE, FL 34761

SUBJECT: FINACERTIS, LLC  
Ref. Number: W05000055022

We have received your document for FINACERTIS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 705A0007188

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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December 6, 2005

1021 Shimmering Sand Drive  
Ocoee, FL 34761  
(407)578-8586

**Letter of Transmittal**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam:

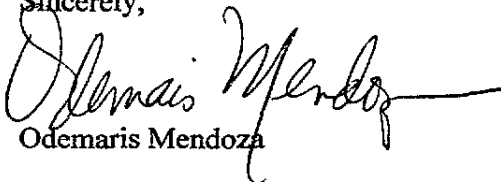
Attached you will find the Articles of Organization for Finacertis, LLC, a Florida Limited Liability Company. Also, you will find a check in the amount of \$125.00 to cover the filing costs.

Please stamp the attached copy of the Articles of Organization with the date they were filed and return for my records.

Should you need to contact me, my address and telephone numbers are stated above.

Thank you for your assistance.

Sincerely,

  
Odemaris Mendoza

2005 DEC 20 PM 2:11  
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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I- Name:**

The name of the Limited Liability Company is: Finacertis, LLC

**ARTICLE II- Address:**

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

1021 Shimmering Sand Drive  
Ocoee, FL 34761

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

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

Odemaris Mendoza  
1021 Shimmering Sand Drive  
Ocoee, FL 34761

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TALLAHASSEE, FLORIDA

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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

**ARTICLE IV-Management (Check the appropriate space if applicable):**

       The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(An additional article must be added if an effective date is requested)

  
Signature of a member or an authorized representative of a member.