

W6000020927

Florida Department of State
Division of Corporations
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

AmeriCap LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **AmeriCap LLC**

ARTICLE II - Address

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

Principal Office Address:

205 Montgomery Avenue, Bldg 1

Sarasota, FL 34243

Mailing Address:

205 Montgomery Avenue, Bldg 1

Sarasota, FL 34243

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

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

Devorah Castor

Name

205 Montgomery Avenue, Bldg 1

(P.O. Box or Mail Drop Box NOT Acceptable)

Sarasota, FL 34243

(City / State / Zip)

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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 - Devorah Castor

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRSharon Larson- 205 Montgomery Avenue, Bldg 1, Sarasota, FL 34243MGRMDevorah Castor- 205 Montgomery Avenue, Bldg I, Sarasota, FL 34243

(Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member or 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.)

Sharon Larson

Typed or printed name of signee

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