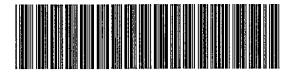
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: LA MUST SIGN ELL. CLUFC (211)
FL LLC 2/24 Office Use Only Tr



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SECRETARY OF STATE

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COVER LETTER

Registration Section

TO:

Division of Cor	porations		
SUBJECT: JFVB C	onsulting Group, LLC	.	
Soldier.	(Name of Limited	l Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	abmitted for filing.	
Please return all correspondent	ondence concerning this matter	r to the following:	
James Von	Bampus		
	1)	Name of Person)	
JFVB Cons	sulting Group, LLC.		
	(1	Firm/Company)	
1100 SE 5	ith Court, # 72		
		(Address)	
Dompano	Beach, FL 33060		
rompano		/State and Zip Code)	
	(,-		
For further information	concerning this matter, please	call:	
James Von Bam	ous	at (954) 942-774	3
(Name of Person)		(Area Code & Daytime To	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 28, 2006

JAMES VON BAMPUS 1100 SE 5TH COURT, #72 POMPANO BEACH, FL 33060

SUBJECT: JFVB CONSULTING GROUP, LLC.

Ref. Number: W06000009916

We have received your document for JFVB CONSULTING GROUP, LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 1, 2006. Please amend your document accordingly.

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) 245-6853.

Letter Number: 606A00014180

Leslie Sellers Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	y is:
JFVB Consulting Group, LLC.	
(Must end with the words "Limited Liability Company, "I	Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1100 SE 5th Court, # 72	1100 SE 5th Court, #72
Pompano Beach, FL 33060	Pompano Beach, FL 33060
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of the same and	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
James Von Bampus	
N	ame
1100 SE 5th Court, # 7	2
Florida stree	et address (P.O. Box NOT acceptable)
Pompano Beach	FL 33060
City, St	ate, and Zip
Having been named as registered agent and	to accept service of process for the above stated limited

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	James Von Bampus
	1100 SE 5th Court, # 72
	Pompano Beach, FL 33060
MGRM	Charlene Von Bampus
	1100 SE 5th Court, # 72
	Pompano Beach, FL 33060
(Use attachment if necessary)	
TICLE V: Effective date, if other than n effective date is listed, the date muse 90 days after the date of filing.)	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days pr
REQUIRED SIGNATURE:	

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.)

James Von Bampus

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE