

FROM : FLORIDA FILING
Division of Corporations

FAX NO. (850) 668-3398

May 12 2006 10:10 AM '04

Page 1 of 1

6060000 49654

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000132465 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : FLORIDA FILING & SEARCH SERVICES
Account Number : I200000000189
Phone : (850) 668-4318
Fax Number : (850) 668-3398

FILED
2006 MAY 10 AM 9:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please keep 5/10/06 Submit/file date if possible

FLORIDA/FOREIGN LIMITED LIABILITY CO.

HERMAN & PARTNERS ADVERTISING, L.L.C.

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

RECEIVED
06 MAY 12 AM 10:22
DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing Menu

Help

606-49654
AL

FROM : FLORIDA FILING

FAX NO. : 8506683398

May. 12 2006 10:15AM P1

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662, TALLAHASSEE, FL 32302
1333 N. DUVAL STREET, TALLAHASSEE, FL 32303
PH: (850) 668-4318 FX: (850) 668-3398

FACSIMILE TRANSMITTAL SHEET	
ATTN: LLC SECTION	
COMPANY:	
FAX NUMBER: 205-0383	TOTAL PAGES TO FOLLOW: 5
RE: HERMAN & PARTNERS ADVERTISING, L.L.C.	

NOTES/COMMENTS:

Attached please find the original fax file cover/order (on the wrong cover sheet- now abandoned), my fax confirmation log, and the LLC filing with the correct Filing Cover Sheet.

If possible, I would like to keep the original May 10 submit date. I realize it was received just after 5pm, so if necessary, we'll take a May 11 file date.

Thank you!

Klm
Florida Filing & Search Services

2006 MAY 10 AM 9:38
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FILED

RECEIVED
06 MAY 12 AM 10:22
DIVISION OF CORPORATION

Please notify us immediately if an error occurs in this transmission.

FROM : FLORIDA FILING

FAX NO. : 8506683398

May. 12 2006 10:16AM P3

FAX

May. 11 2006 09:09AM

YOUR LOGO : FLORIDA FILING

YOUR FAX NO. : 8506683398

NO.	OTHER FACSIMILE	START TIME	USAGE TIME	MODE	PAGES	RESULT	*CODE
01	239 334 3378	May. 10 10:25AM	00'33	RCV	01	OK	
02	15616417516	May. 10 10:43AM	00'54	SND	01	OK	
03	18003821256	May. 10 11:19AM	00'35	SND	01	OK	
04	14078238939	May. 10 11:20AM	00'35	SND	01	OK	
05	314 843 1238	May. 10 11:26AM	03'12	RCV	20	OK	
06	256 539 7768	May. 10 11:54AM	00'31	RCV	01	OK	
07	13024215753	May. 10 12:40PM	00'50	SND	00	COMMUNICATION ERROR	43
08	13024215753	May. 10 12:42PM	00'55	SND	00	PRESSED THE STOP KEY	
09	13024215753	May. 10 12:52PM	00'51	SND	01	OK	
10	Capitol Services	May. 10 01:45PM	00'43	RCV	02	OK	
11	Capitol Services	May. 10 02:58PM	00'47	RCV	02	OK	
12	6514880200	May. 10 03:41PM	00'34	RCV	01	OK	
13	6514880200	May. 10 03:47PM	00'35	RCV	01	OK	
14	13053476466	May. 10 04:07PM	00'41	SND	00	OTHER FAX NOT RESPONDING	
15	13053476466	May. 10 04:09PM	00'41	SND	00	OTHER FAX NOT RESPONDING	
16	13053476466	May. 10 04:10PM	01'10	SND	03	OK	
17	15616417516	May. 10 04:15PM	01'08	SND	02	OK	
18	00000000000	May. 10 04:18PM	00'41	RCV	02	OK	
19	15616417516	May. 10 04:26PM	01'23	SND	03	OK	
20	13047271353	May. 10 04:30PM	00'35	SND	01	OK	
21	2050363	May. 10 05:04PM	01'00	SND	03	OK	
22	Fax	May. 10 05:36PM	00'29	RCV	01	OK	
23	<FAX # NOT AVAIL.>	May. 10 05:44PM	02'40	RCV	10	OK	
24	via TargetFax	May. 11 04:53AM	00'49	RCV	01	OK	
25	+420 2 2421 5134	May. 11 06:11AM	00'46	RCV	01	OK	
26	financial services	May. 11 07:49AM	00'47	RCV	01	OK	
27	Independent Rese	May. 11 08:07AM	01'19	RCV	04	OK	
28	Independent Rese	May. 11 08:09AM	00'38	RCV	01	OK	
29	ask-services.com	May. 11 08:14AM	01'35	RCV	04	OK	
30	9047430022	May. 11 09:09AM	01'00	RCV	03	OK	

*CODE = FOR SERVICE CENTER USE ONLY

FOR FAX ADVANTAGE ASSISTANCE, PLEASE CALL 1-800-HELP-FAX (435-7329).

FILED
 MAY 10 AM 9:38
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FROM : FLORIDA FILING

FAX NO. : 8506683398

May. 12 2006 10:16AM P5

H 6 0 0 0 1 3 2 4 6 5

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HERMAN & PARTNERS ADVERTISING, L.L.C.

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "[L.L.C.]" or "[L.C.]")

ARTICLE II - Address:

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

Principal Office Address:

721 HUCKLEBERRY LANE
NORTH PALM BEACH, FL 33408

Mailing Address:

721 HUCKLEBERRY LANE
NORTH PALM BEACH FL 33408

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

CHRIS HERMAN
Name

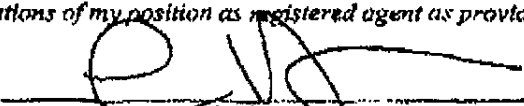
721 HUCKLEBERRY LANE
Florida Street address (P.O. Box **NOT** acceptable)

NORTH PALM BEACH FL 33408
City, State, and Zip

2006 MAY 10 AM 9:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

05/10/2006 WED 14:44 (TX/RX NO 5794) 003

H 6 0 0 0 1 3 2 4 6 5

H 0 6 0 0 0 1 3 2 4 6 5

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:

MGRM

~~XXXXXXXXXXXXXXXXXXXX~~

CHRIS HERMAN

771 HUCKLEBERRY LANE

NORTH PALM BEACH FL 33406

MGR

~~XXXXXXXXXXXXXXXXXXXX~~

JOSEPH HERMAN

3288 NORTHSIDE PARKWAY #701

ATLANTA GA 30327

~~XXXXXXXXXXXXXXXXXXXX~~~~XXXXXXXXXXXXXXXXXXXX~~

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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

(In accordance with section 608.405(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Chris Herman, Member and Manager

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 10.00 Certified Copy (Optional)
\$ 3.00 Certificate of Status (Optional)

Page 2 of 2

06/10/2006 WED 14:44 [TX/RX NO 57941] 002

H 0 6 0 0 0 1 3 2 4 6 5