

## Florida Department of State

Division of Corporations Public Access System

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

PIERRE & ST LOUIS & ASSOCIATES, LLC

Certificate of Status	1
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ARTICLES OF ORGANIZATION FOR FLO	DRIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name: The name of the Limited company is:		
Pierre & St Louis & Associates, LL		
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	lice Address: Mailing address:	
9165 PARK DRIVE	9165 park drive	
SUITE #8	SUTTE #8	
Miami Shores, FL 33138	Miami Shores, FL 33138 PS	
article II – registered agent, rigi Signature:	STERED OFFICE, & RIGISTERED AGENT SSEED	
The name and the Florida stress address of the re-	glutered agent are:	
Estime 7	Chompson P.A. CREEK CO. ST. Name	
9165 pa	rk drive, ste. 8	
Florida street addres	ss(P.O. Box <u>NOT</u> acceptable)	
	ni, FL 33138 States, and Zip	
City,	<i>அள</i> ு வர ∞ு ந	

Having been named as registered agent and to accept service of process for 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 and my duttes, and I am familiar with and accept the obligations of my position as agent as provided for in chapter 608 ff. S.

(CONTINUED)

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## PAGE 1 of 2

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	FIRST LOAN SOLUTE	ON, INC.	
	9165 PARK DRIVE, STE. 8		
	MIAMI, FL 33138	200 SE	
MGRM	PIERRE GUERDIE	2006 HAY	
	9165 PARK DRIVE, STE 8	ARY ARY	
	MIAMI, FL 35138	E P	
•		8: 5 RE- RE- RE- RE- RE- RE- RE- RE- RE- RE-	
	**************************************	DM O	
•		······································	
(Use attachment if necessary)			
NOTE: An additional article must be add	led if an affective data is requested.		
REQUIRED SIGNATURE:	Marill Ball	2	
Signature of a member of	r an authorized representative of a member.		

(in accordance with section 608,408(3), Florida simutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Marie Estime Thompson Type or printed name of signes

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**ATTACHMENT** 

Saint-Louis, Guy

<u> MGRM</u>

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