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(Requestor's Name)				
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE

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COVER LETTER

Division of Co			
SUBJECT:	Dynamic Bus	siness Brokers	
SUBJECT:	(Name of Limite	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
_	Johr	n M. O'Neill	
	(1	Name of Person)	
	Dynamic	Business Brokers	
	(Firm/Company)	
	6709 M	ontego Bay Blvd.	
·	·	(Address)	
	Boca	Raton, FL 33433	
	(City.	(State and Zip Code)	
For further information	concerning this matter, please	call:	
John N	fl. O'Neill	at (8-5686
(Name	of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	or the following amount:		
S125.00 Filing Fee		\$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 Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Dynamic Business Brokers, LLC

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

ARTICLE 11 - Address:

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

Principal Office Address:	<u>Mailing Addre</u>	<u>ss:</u>
6709 Montego Bay B	lvd. 6709 Mon	itego Bay Blvd.
Boca Raton, FL 334	Raton, FL 33433 Boca Raton, FL 33433	
(The Limited Liability Company cannot business entity with an active Florida re	Agent, Registered Office, & Regist serve as its own Registered Agent. You must degistration.) et address of the registered agent ar John M. O'Neill	re:
	Name	
	6709 Montego Bay Blvd.	acceptable)
_ 	Florida street address (P.O. Box NOT	acceptable)
	Boca Raton, FL 33433	
	City, State, and Zip	

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 3

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR John M. O'Neill 6709 Montego Bay Blvd. Boca Raton, FL 33433 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (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 608.408(3), Florida Statutes, the execution

of this document constitutes an affirmation under the penalties of perjury

John M. O'Neill

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)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE