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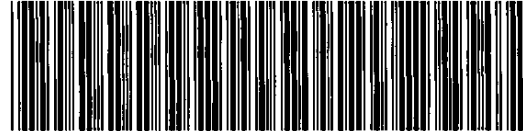
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Nikki

Requestor's Name

Address

City

State

ZIP

Phone

VALIDATION ONLY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

Promised Financial Investments, LLC

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☒ Other LLC

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy of Articles

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick-Up

☐ Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier



Empire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the limited Liability Company is: **Promised Financial Investments, LLC**

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1501 NW 47th Ave Suite D
Lauderhill, FL 33313

ARTICLE III- Registered Agent and Registered Office:

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

Sabrina G. Butler

Name

1501 NW 47th Suite D

Florida Street Address (P.O. Box Not acceptable)

Lauderhill, FL 33313

City, State and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

X Sabrina G. Butler
Registered Agent's Signature

X Winnifred McPherson
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 penalties of perjury that the facts stated herein are true.)

Winnifred McPherson

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

Promised Financial Investments, LLC

First that _____

Desiring to organize under the laws of the State of Florida with its principal office, as
Sabrina G. Butler

Indicated in the articles of incorporation has named _____
1501 NW 47th Ave, Suite D

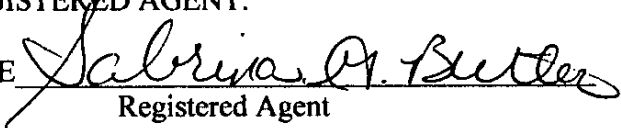
Located at _____

Lauderhill **Broward**
City of _____ County of _____ State of Florida,

As its agent to accept service of process within the state.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

SIGNATURE


Registered Agent

OPERATING AGREEMENT FOR

The business will be managed by its members in the following capacity:

President: **Winnifred McPherson**

Vice President: **Pamela Julien**

Director of Investments: **Bonnie Chambers**

Director of Finance: **Sabrina G. Butler**

Director of Administration: **Shaletha Edwards**

Chaplain **Jeannine Booker**

Properties will be purchased by Tenants in Common. The members will contribute money and services to **Promised Financial Investments, LLC** and receive an equal interest in profits and losses.