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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE DIVISION OF CORPORATIONS

4. BRYAN SEP 1 2 2006.

COVER LETTER

TO: Registration So Division of Co				
SUBJECT: Maria	Soldani Consultant	S, LLC d Liability Company)	<u></u>	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	condence concerning this matte	er to the following:		
Maria Sol	dani			
	(Name of Person)		
Maria Sol	dani Consultants,	LLC		S 90 SINITE
	(Firm/Company)		中紹
1142 SW	/ 1st Ave.			DE SEP 11 PH 2: 17
		(Address)		M 2
Pompan	o Beach, FL 330	060		: - 1 Second
		/State and Zip Code)		 5
For further information	concerning this matter, please	call:		
Maria Soldani		at (954) 592-854		
(Name	e 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)	S160.00 Filing Certificate of Status Certified Copy (additional copy is enclosed)	s &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO **ARTICLE I - Name:** The name of the Limited Liability Company is: Maria Soldani Consultants, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," 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: Mailing Address:** 1142 SW 1st Ave. 1142 SW 1st Ave. Pompano Beach, FL 33060 Pompano Beach, FL 33060 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: Maria Soldani Name 1142 SW 1st Ave Florida street address (P.O. Box NOT acceptable) Pompano Beach 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

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

(CONTINUED)
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:

N/4 TK = N/19D9(JPT	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	r
MGRM	Maria Soldani
	1142 SW 1st Ave.
	Pompano Beach, FL 33060
	Maria Soldani 1142 SW 1st Ave. Pompano Beach, FL 33060
	
(Use attachment if necessary)	alalas
CLE V: Effective date, if other the ffective date is listed, the date in	tan the date of filing: $\frac{9/8/06}{}$ (OPTIONA nust be specific and cannot be more than five business days
CLE V: Effective date, if other the effective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE:	ria J. Saldani
CLE V: Effective date, if other the ffective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a secondance of this document.	nan the date of filing: 9/8/06 (OPTIONA nust be specific and cannot be more than five business days member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.)
CLE V: Effective date, if other the ffective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a secondance of this document.	member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)