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SECRETARY OF STATE
SECRETARY SSEE, FLORID

### **COVER LETTER**

Division of Corporations		
SUBJECT: IRC Services, LLC		
(Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Amy J. Galloway, Esq.		
(Name of Person)		
Duke Mullin & Galloway, P. A.		
(Firm/Company)		
1700 E. Las Olas Blvd., PH-1		
(Address)		
Fort Lauderdale, FL 33301		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Amy J. Galloway at (954) 761-7200 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\ \text{Certificate of Status} \]  \$130.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)		
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

#### IRC SERVICES, LLC

#### **ARTICLE II - Address:**

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

#### **Principal Office Address:**

Mailing Address:

3125 NW 25 Avenue Pompano Beach, FL 33069 3125 NW 25 Avenue Pompano Beach, FL 33069

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

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

James E. Martin 3125 NW 25 Avenue Pompano Beach, FL 33069 O6 SEP 15 PM 2: 04
SECRETARY OF STATE
SECRETARY OF STATE

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

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#### **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

**MGRM** 

James E. Martin 3125 NW 25 Avenue Pompano Beach, FL 33069

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 that the facts stated herein are true.)

James E. Martin

Typed or printed name of signee

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