

L070000005-97

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax and audit number (shown below) on the top and bottom of all pages of the document.

((H070000004583))



H070000004583ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305)634-3694  
Fax Number : (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

findis consulting, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

2007 JAN -2 A 9:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

07 JAN -2 PM 2:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AL

406000000458

**ARTICLES OF ORGANIZATION  
OF  
Findis Consulting, LLC**

③  
The undersigned does hereby subscribe to and file these Articles of Organization for the purpose of organizing a limited liability company under the Florida Limited Liability Company Act.

**ARTICLE I  
NAME**

The name of this limited liability company is:  
**Findis Consulting, LLC**

**ARTICLE II  
PRINCIPAL OFFICE/MAILING ADDRESS**

The principal office and mailing address of this limited liability company is:

11000 SW 153<sup>rd</sup> Street  
Miami, Florida 33157

**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED  
AGENT'S SIGNATURE**

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

Meika D Webster  
11000 SW 153<sup>rd</sup> Street  
Miami, Florida 33157

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.

  
\_\_\_\_\_  
Meika Webster  
Registered Agent

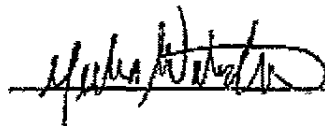
Prepared By: Ingrid M. Hochstetler CPA  
License No. AC-0032360  
10235 West Sample Road  
Suite 205  
Coral Springs, FL 33065  
954-752-2758

407000000458

406000000458

**ARTICLE IV  
MANAGEMENT**

*The limited liability company is to be managed by its members and is, therefore, a member-managed company.*



**Name: Meika D Webster**

**Title: Authorized Representative of the  
Members.**

*(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.)*

**FILED**

2007 JAN -2 A 9:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Prepared By: Ingrid M. Bachelor CPA  
License No. AC-0032360  
10235 West Sample Road  
Suite 205  
Coral Springs, FL 33065  
954-752-2758

407000000458