L0700048046

(Requestor's Name)
•
(Address)
(Address)
, ,
(City/State/Zip/Phone #)
(City/Cationally)
PICK-UP WAIT MAIL
,
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Wij7-18431
Special instructions to I mily Officer.
•
D_{R}

Office Use Only



500096438135

04/13/07--01017--012 **130.00

07 MAY -4 AM II: 02
SECRETARY OF STATE
TALLAHASSEE, ELORIO



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 16, 2007

JAMES KING P.O. BOX 263 BOCA RATON, FL 33429

SUBJECT: PHP LEADERS.COM LLC

Ref. Number: W07000018431

07 MAY -4 AM II: 02
SECRETARY OF STATE
TALL AHASSEE FLORIDA

We have received your document for PHP LEADERS.COM LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Document Specialist

Letter Number: 907A00025331

COVER LETTER

	stration Se sion of Co	rporations						
SUBJECT:	PHP L	eaders.com LLC						
		(Name of Limite	d Liability Compa	my)				
The enclosed	Articles of	f Organization and fee(s) are s	ubmitted for filing	; ,				
Please return a	all corresp	ondence concerning this matte	er to the following	;				
Jam	es Kir	ng				7		
		(Name of Person)			ECR)7 MA	€h.z
						ETA HAS	7 -	(90)
		((Firm/Company)			SEE.	±	ine.
P.O	. Box	263				S. S.	AM III:	į į
			(Address)			RAT	<u></u>	E CONTRACTOR OF THE PERSON OF
Вос	a Rat	on, FL			•	≯'''	10	
- · · · · · · ·		(City	/State and Zip Code)				
For further inf	ormation	concerning this matter, please	call:					
James Ki	ing	•	at (_561)	283 13	37			
•	(Name	of Person)		& Daytime T	elephone Number	r)		
Enclosed is a	check fo	r the following amount:						
\$125.00 Fil	ling Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	7	\$160.00 Certificate of Certified C (additional cop	of Statu opy	s &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Olivision C Clifton Bu 2661 Exe	of Corporatio	ns · Circle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

PHP Leaders.com LLC	
(Must end with the words "Limited Liability Company, "Limit	ted Company" or their abbreviation "I.I.C," or "L.C")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
480 NW ZOTH ST #214	P.O. Box 263,
480 NW ZOTH ST # 214 BOCA RATON, FL 33431	Boca Raton, FL 33429
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	stered Agent. You must designate an individual Fallother
The name and the Florida street address of the	registered agent are:
James King	
Name	
5122 Oak Hill Rd,	ATE ORID
	dress (P.O. Box NOT acceptable)
	D

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..

(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:

	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	James King
·	5122 Oak Hill Road
	Delray Beach, FL 33484
	
(Use attachment if necessary)	
(Use attachment if necessary)	
TICLE V: Effective date, if other than the	date of filing:
TICLE V: Effective date, if other than the an effective date is listed, the date must be	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior
FICLE V: Effective date, if other than the	
FICLE V: Effective date, if other than the n effective date is listed, the date must be r 90 days after the date of filing.)	e specific and cannot be more than five business days prior
ΓICLE V: Effective date, if other than the n effective date is listed, the date must be	
FICLE V: Effective date, if other than the n effective date is listed, the date must be r 90 days after the date of filing.)	e specific and cannot be more than five business days prior SECRETARY LLAHASSET
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior SECRETARY LLAHASSET
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior SECRETARY LLAHASSET
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document consti	er or an authorized representative of a member of a me
FICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with secondary)	er or an authorized representative of a member of a me

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)