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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

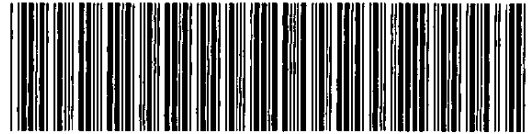
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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Precision Capital Management, 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:

**Jeffrey Stern**

(Name of Person)

**Precision Capital Management, LLC**

(Firm/Company)

**1395 Brickell Avenue, Suite 3003**

(Address)

**Miami, Florida 33131**

(City/State and Zip Code)

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For further information concerning this matter, please call:

**Jeffrey Stern** at ( **305** ) **682-9829**  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION**  
**For**  
**Florida Limited Liability Company**

**Article I**

The name of the Limited Liability Company is:  
Precision Capital Management, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
1395 Brickell Avenue, Suite 3003  
Miami, Florida 33131

The mailing address of the Limited Liability Company is:  
1395 Brickell Avenue, Suite 3003  
Miami, Florida 33131


**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
Samantha Stevens, Esq.  
2656 Airport Road South  
Naples, Florida 34112

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.


  
Signature of Registered Agent

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**Article IV**

The name and address of the managing members / managers are:

Title: Manager  
Jeffrey Stern  
1395 Brickell Avenue, Suite 3003  
Miami, Florida 33131



Signature of member or authorized  
representative a of member

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