

L07000096734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

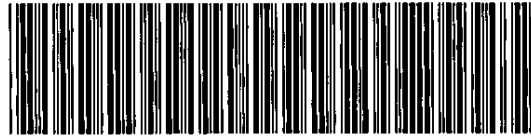
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200109547072

RECEIVED  
07 SEP 21 PM 4:14  
DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 SEP 21 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 239994 7597879

AUTHORIZATION

*[Signature]*

COST LIMIT : \$125.00

ORDER DATE : September 21, 2007

ORDER TIME : 3:35 PM

ORDER NO. : 239994-005

CUSTOMER NO: 7597879

FILED  
07 SEP 21 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: STAR FINANCIAL MANAGEMENT,  
LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kelly Courtney - EXT. 2916

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
Of  
STAR FINANCIAL MANAGEMENT, LLC**

**FILED**  
07 SEP 21 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I  
NAME**

The name of the Limited Liability Company is **STAR FINANCIAL MANAGEMENT, LLC.**

**ARTICLE II  
ADDRESS**

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

12799 Hyland Circle  
Boca Raton, FL 33428

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

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

Lisa Star Dombro  
12799 Hyland Circle  
Boca Raton, FL 33428

*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.*

By: /Lisa Star Dombro  
Registered Agent's Signature

**ARTICLE IV  
DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE V  
MANAGEMENT**

The Limited Liability Company is to be managed by one or more managers and is therefore, a Manager-Managed company. The following is the name and address of the Managing Manager:

MGRM -     Lisa Star Dombro  
              12799 Hyland Circle  
              Boca Raton, FL 33428

**ARTICLE VI  
ADMISSION OF ADDITIONAL MEMBERS**

The member(s) of this Limited Liability Company shall have the right to admit additional members.

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.

**DATED:**     September 21, 2007

/Lisa Star Dombro  
Signature of Authorized Representative  
Lisa Star Dombro