

607000 100134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

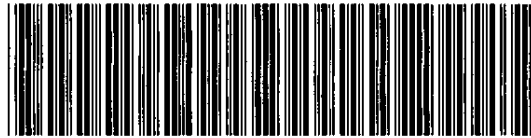
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

ult

Office Use Only



400109171244

10/01/07--01038--007 **155.00

FILED
07 OCT - 1 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LAW OFFICES OF
JAMES M. HAMMOND**

JAMES M. HAMMOND

BELCHER POINT PROFESSIONAL CENTER
1831 N. BELCHER ROAD, SUITE A-1
CLEARWATER, FL 33765

(727) 791-0044
FAX (727) 791-1130

September 28, 2007

VIA FED EX NO. 8586 9935 6228

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: Formation of CFGN Diversified, LLC

Dear Sir/Madam:

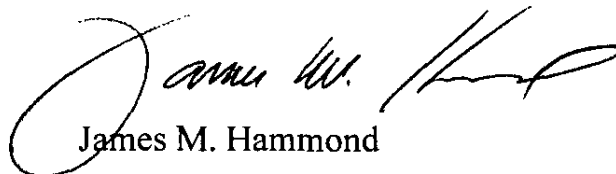
I enclose herein an original and copy of Articles of Organization for the above-named limited liability company. In addition, enclosed please find check no. 9124 in the amount of **\$155.00** representing the following fees is enclosed:

Filing Fee	\$100.00
Certified Copy Fee	30.00
Registered Agent Fee	<u>25.00</u>
Total:	\$155.00

Please file the original Articles of Organization and return a certified copy thereof to the undersigned at your earliest convenience.

Your prompt attention to this matter is appreciated.

Very truly yours,


James M. Hammond

JMH/cmj
Encl.

FILED
07 OCT - 1 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

CFGN DIVERSIFIED, LLC

The undersigned, being authorized to execute and file these Articles for the purpose of forming a Limited Liability Company pursuant to Chapter 608, Florida Statutes, does hereby certify that:

ARTICLE I

NAME

The name of this Limited Liability Company is:

CFGN DIVERSIFIED, LLC.

ARTICLE II

PRINCIPLE PLACE OF BUSINESS

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

1811 N. Belcher Road, Suite I-2
Clearwater, FL 33765

FILED
07 OCT - 1 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III

DURATION

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

ARTICLE IV

PURPOSES

This Limited Liability Company is organized for the purpose of transacting any and all lawful business including, but not limited to, the sale and/or financing of account receivables.

ARTICLE V

AUTHORIZED REPRESENTATIVE

The initial authorized representative, the person acting to form this limited liability company, and authorized by all initial members of such Company, shall be:

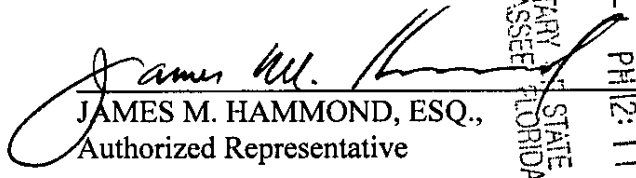
JAMES M. HAMMOND, ESQ.
1831 N. Belcher Road, Suite A-1
Clearwater, FL 33765

ARTICLE IV

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of this Limited Liability Company is: 1831 N. Belcher Road, Suite A-1, Clearwater, FL 33765; and the name of the initial registered agent of this limited liability company at such address is: JAMES M. HAMMOND, ESQ.

IN WITNESS WHEREOF, I have subscribed my name this 28 day of September, 2007.

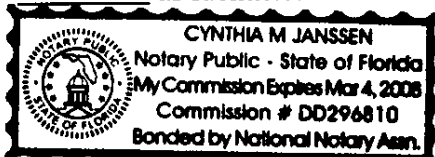

JAMES M. HAMMOND, ESQ.,
Authorized Representative

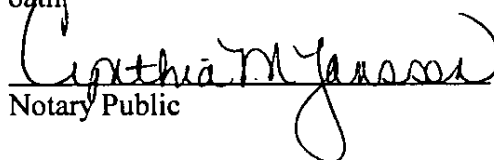
07007 - PH12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

STATE OF FLORIDA
COUNTY OF PINELLAS

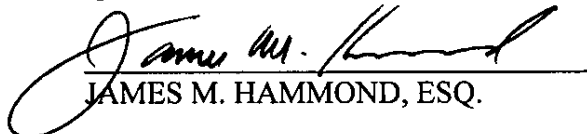
The foregoing instrument was acknowledged before me this 28th day of September, 2007, by James M. Hammond, who is personally known to me or who has produced _____ as identification and who did not take an oath




Cynthia M. Janssen
Notary Public

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

I, JAMES M. HAMMOND, ESQ. accept the appointment as Registered Agent of the Company simultaneously with being designated herein, and state that I am familiar with and accept the obligations of that position as provided for in Chapter 608, Florida Statutes.


JAMES M. HAMMOND, ESQ.