

L07000118826

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 audit number (shown below) on the top and bottom of all pages of the document. -

(((H07000286420 3)))



H070002864203ABC\$

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) 617-6383

From:
Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

FILED
07 NOV 28 AM 8:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.**Change Begins With LLC**

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

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED
07 NOV 28 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FAX AUDIT # 4070002864203

**ARTICLES OF ORGANIZATION
OF
Change Begins With LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Change Begins With LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this ~~Limited Liability Company~~ shall be:
3500 Galt Ocean Drive #2917, Fort Lauderdale, Florida 33308.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Barbara Arbesfeld, 3500 Galt Ocean Drive
#2917, Fort Lauderdale, Florida 33308. Located in the County of Broward.

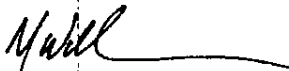
ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2047.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and
addresses of the members of the Limited Liability Company are:

Barbara Arbesfeld, 3500 Galt Ocean Drive #2917, Fort Lauderdale, Florida 33308
Nolan Lerner, 11300 SW 22nd Ct, Davie, Florida 33325



Date: November 16, 2007

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717

(608) 827-5300

FILED
07 NOV 28 AM 8:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FAX AUDIT # 4070002864203

FAX AUDIT # 110700002864203

CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

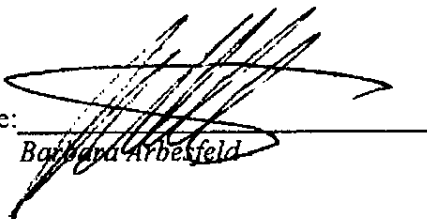
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE
UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Change Begins With LLC**

The name and address of the registered agent and office is Barbara Arbesfeld, 3500 Galt Ocean
Drive #2917, Fort Lauderdale, Florida 33308. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated
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:


Barbara Arbesfeld

11-20-07
Date:

FILED
07 NOV 28 AM 8:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FAX AUDIT # 110700002864203