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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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	Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File
	Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement
	Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name
Signature	Corp Record Search Officer Search Fictitious Search Fictitious Owner Search
Requested by: $ \frac{12 \cdot 10}{\text{Name}} = \frac{130}{\text{Time}} $	Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval

ARTICLES OF ORGANIZATION FOR

MIDDLE MARKET CAPITAL, LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is MIDDLE MARKET CAPITAL, LLC

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is 1200 North Federal Highway, Suite 200, Boca Raton, FL 33432

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is George Zomber, 1200 North Federal Highway, Suite 200, Boca Raton, FL 33432

ARTICLE IV: MANAGING MEMBERS

The name and address of the initial Managing Member of the company is:

George Zomber, Managing Member, 1200 North Federal Highway, Suite 200, Boca Raton, FL 33432

The undersigned has executed these Articles of Organization this 10th day of December 2007.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"

Authorized Representative

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415. Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

١.	The name of the c	ompany is: _	MIDDLE	MARK	ET CAPI	TAL L	10
						<u> </u>	
2.	The name and add	lress of the re	gistered agent :	and office is: _			
	GEORGE	ZOMBE	R				
	1200 h	LORTH F	EDERAL	HIGHWA	74, Scrive	200	
	13001	200	77) 2	21/22	7-7		

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.