## 7000125653

(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



900112884479

12/20/07--01002--014 \*\*125.00

CORPDIRECT AGES 515 EAST PARK AVI TALLAHASSEE, FL 222-1173	ENUE ,	merly CCRS)		
FILING COVER S ACCT. #FCA-14	SHEET			
CONTACT:	TRICIA TA	<u>DLOCK</u>	OTDEC 19 M 8: 37 SECRETARY OF STATEMENT OF S	
DATE:	12/19/07		SSEE TO	
<b>REF.</b> #:	<u>0153.78874</u>		8: 31 F1 08	
CORP. NAME: SHEFF & ASSOCIATES LLC				
( ) ARTICLES OF INCO ( ) ANNUAL REPORT ( ) FOREIGN QUALIFIC ( ) REINSTATEMENT ( ) CERTIFICATE OF C ( ) OTHER:	CATION	( ) ARTICLES OF AMENDMENT ( ) TRADEMARK/SERVICE MARK ( ) LIMITED PARTNERSHIP ( ) MERGER	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAME ( XX ) LIMITED LIABILITY ( ) WITHDRAWAL	
		TH CHECK# 524058		
AUTHORIZATI	UN FUR A	CCOUNT IF TO BE DEBITE	<b>υ:</b>	
	COST LIMIT: \$			
PLEASE RETUR	en:			
( ) CERTIFIED COPY ( ) CERTIFICATE OF		ERTIFICATE OF GOOD STANDING	( XX ) PLAIN STAMPED COPY	

Examiner's Initials

## ARTICLES OF ORGANIZATION OF SHEFF & ASSOCIATES LLC a Florida Limited Liability Company

TALLAHASSEE, FLO

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- 1. NAME. The name of the Limited Liability Company is SHEFF & ASSOCIATES LLC (the "Company").
- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 8876 Hidden River Parkway, Suite 300, Tampa, Florida 33637
- 3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Heidi Sheff, 8876 Hidden River Parkway, Suite 300, Tampa, Florida 33637.

The undersigned has executed these Articles of Organization on the  $18^{th}$  day of December, 2007.

SHEFF & ASSOCIATES LLC

Heidi E. Sheff, Mombe

## CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

- 1. The name of the limited liability company is: SHEFF & ASSOCIATES LLC.
- 2. The name and address of the registered agent and office is: Heidi Sheff, 8876 Hidden River Parkway, Suite 300, Tampa, Florida 33637.

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 its 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.

By: XIXX Heidi E. Sheff.

(Date)