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CORPORATION(S) NAME

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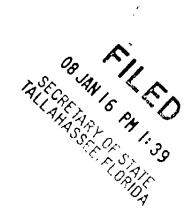
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**Empire** Toll Free: 1-800-432-3028

## ARTICLES OF ORGANIZATION OF



### **Premier Debt Marketing, LLC**

The undersigned member, for the purpose of forming a Limited Liability Company under the Laws of the State of Florida, hereby adopts the following Articles of Organization:

#### **ARTICLE L**

#### **NAME**

The name of the Limited Liabilty Company shall be:

Premier Debt Marketing, LLC

#### **ARTICLE II**

#### **PURPOSE**

The company is organized for any legal and lawful purpose for which a Limited Liabilty Company may be organized pursuant to the act.

#### **ARTICLE III**

#### PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:

2617 NW 98th Lane

Coral Springs, FL 33065

#### **ARTICLE IV**

#### INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial agent is:

David A. Kushner 2617 NW 98th Lane Coral Springs, Fl 33065

#### ARTICLE V

#### **MEMBERS**

The Members of the Limited Liabilty Company shall be:

Managing Member:

David Kushner

Address:

2617 NW 98th Lane

Coral Springs, FL 3065

Member:

Jill L. Spinder

Address:

12661 Magnolia Court

Coral Springs, FL 33071

The undersigned has executed these Articles of Organization this

10th day of January, 2008.

Signature

(In accordance with section 608.408(3), Florida Stateues, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

SIGNATURE_	David A. Kushner
TITLE	_Member
DATE1/10/	/08

#### **CERTIFICATE OF DESIGNATION**

#### REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILTY COMPANY AT THE PLACE DESIGNATED IN THESE ARTICLES OF ORGANIZATION, 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		2	KS	
DATE	1/10/08			