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MAR 2 7 2008

EXAMINER





ACCOUNT NO. : 07210000032

REFERENCE: 503814 7363367

AUTHORIZATION :

COST LIMIT :

ORDER DATE: March 27, 2008

ORDER TIME : 10:20 AM

ORDER NO. : 503814-035

CUSTOMER NO: 7363367

DOMESTIC FILING

NAME: ENBENT FINANCIAL LLC

EFFECTIVE DATE:

XX __ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	: ALCOMAN
ENBENT FINANCIAL LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	70
The mailing address and street address of the p	orincipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1337 S. INTERNATIONAL PKWY	45 HIGHMOUNT AVENUE

WARREN, NI 07059

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

SUITE 1301

LAKE MARY, FL 32746

ENBENT LLC	
N	lame
1337 S. INTERNAT	TONAL PKWY
Florida stree	et address (P.O. Box NOT acceptable)
LAKE MARY	_{FL} 32746
City, St	late, and Zip

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 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 as provided for in Chapter 608, F.S.,

> **ENBENT LLC** BY:

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGRM BENJAMIN R. BACHAND 45 HIGHMOUNT AVENUE WARREN, NI 07059 MGRM JACLYN P. PALEY 45 HIGHMOUNT AVENUE WARREN, NJ 07059 WARREN, NJ 07059 (Use attachment if necessary)

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

ARTICLE V: Effective date, if other than the date of filing:

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

. (OPTIONAL)

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

BENJAMIN R. BACHAND

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)