

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number: 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

ADVANCED INVESTMENT CAPITAL, LLC

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICUDE, Names

ADVANCE	D INVESTMENT CAPITAL, LLC	
ARTICLE II- Address: The mailing address and stree is:	et address of the principal office of the Limited Li	isbility Company
Principal Office Address:	Mail	ing Address;
1606 SW 39th STREET	16065	SW 39th STREET
MIRAMAR FL 33027	<u>MIRA</u>	MAR, FL 33027_
-	gent, Registered Office, & Registered Agent's cet address of the registered agent are:	Signature:
-	cot address of the registered agent are:	Signature:
-	• •	Signature:
-	cot address of the registered agent are: ROBERT ANDERSON	Signature: SECRETARY OF TALLAHASSEE
-	ect address of the registered agent are: ROBERT ANDERSON Name	08 APR 17 AM SECRETARY OF TALLAHASSEE F
The name and the Florida stre	cot address of the registered agent are: ROBERT ANDERSON	08 APR 17 AM SECRETARY OF TALLAHASSEE F
The name and the Florida stre	not address of the registered agent are: ROBERT ANDERSON Name 1606 SW 39 th STREET	08 APR 17 AM 8: I SECRETARY OF STA TALLAHASSEE FLOR

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 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 provided for in chapter 608, F.S.

Registered Agent's Signature

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ARTICLE IV-Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: <u>Title:</u> "MGR"= Manager Name and Address: "MGRM"= Managing Member MGR ROBERT ANDERSON 1606 SW 39 STREET MIRAMAR, FL 33027 **MGRM** ROBERT JAMES 1606 SW 39th STREET MIRAMAR, FL33027 **MGRM** REGINALD BAROSY 1606 SW 39th STREET MTRAMAR, FL 33027 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.

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

(In accordance with acction 608408(3), Florida Statues, the execution of this document constitutes and affirmation under the penalties of perjury that the facts stated herein are true.)

408000100361

ROBERT ANDERSON

Typed or printed name of signee