

LO8 0000 48174

(Requestor's Name)

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(City/State/Zip/Phone #)

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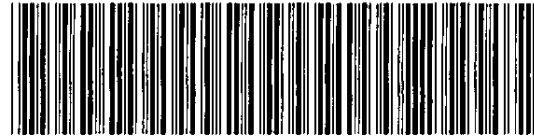
(Business Entity Name)

(Document Number)

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08 MAY 12 PM 3:44
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 MAY 12 PM 4:55
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

MAY 15 2008

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: ASHLEY SMITH

DATE: 05-12-2008

REF. #: 000197.86755

CORP. NAME: GUARDIAN FUND, L.L.C.

FILED
08 MAY 12 PM 4:55
TALLAHASSEE, FLORIDA

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 10234 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 13, 2008

ASHLEY SMITH
CORPDIRECT AGENTS
TALLAHASSEE, FL

SUBJECT: GUARDIAN FUND, L.L.C.
Ref. Number: W08000023755

* Please use original
submission date as
the file date *

We have received your document for GUARDIAN FUND, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$125.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 808A00030389

FILED
08 MAY 12 PM 4:35
TALLAHASSEE, FLORIDA

RECEIVED
08 MAY 14 PM 2:25
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

Credit Save LLC

FILED
08 MAY 12 PM 1:55
TALLAHASSEE, FLORIDA

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, does hereby set forth the following:

ARTICLE I
NAME

The name of the limited liability company is: Credit Save LLC

ARTICLE II
PERIOD OF DURATION

The period of duration of the limited liability company shall be from the date of filing these Articles of Organization until the dissolution of the limited liability company pursuant to provisions of the Florida Limited Liability Company Act.

ARTICLE III
PURPOSE

The purpose for which the limited liability company is organized is to engage in the purchase, sale, rental, mortgaging and operating of real estate, and all other business and activities permitted by the laws of the State of Florida. The limited liability company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

ARTICLE IV
ADDRESS OF PLACE OF BUSINESS

The mailing address, and the place of business in Florida, is 3501 Keyser Avenue, Villa #60, Hollywood, Florida 33021.

ARTICLE V
REGISTERED AGENT

The name and address of the initial registered agent in Florida of the limited liability company is JoANN MEYER, 3501 Keyser Avenue, Villa #60, Hollywood, Florida 33021.

ARTICLE VI
ADDITIONAL CONTRIBUTIONS

The total additional contributions, if any, agreed to be made by all members and the times at which, or the events happening of which, that shall be made are as follows: No total

additional contributions have been agreed to at the date of filing these Articles of Organization. Additional contributions, if any, will be made upon unanimous agreement by all of the members of the limited liability company, and in accord with Chapter 608, Florida Statutes.

ARTICLE VII
MEMBERS

The initial members of the Organization are:

JOANN MEYER

100%

Members may admit additional members upon unanimous agreement of the then existing members.

ARTICLE VIII
CONTINUITY OF BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the business of the limited liability company shall not be continued and the limited liability company shall be dissolved unless there is obtained the consent of all the remaining members of the limited liability company.

ARTICLE IX
MANAGEMENT

The limited liability company is to be managed by its


managers. The name and address of the initial managers of the limited liability company are as follows:

<u>NAME</u>	<u>ADDRESS</u>
JOANN MEYER	3501 Keyser Avenue Villa #60 Hollywood, Florida 33021

The initial manager shall serve until her successor is elected and qualifies.

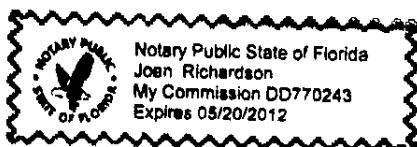
I AM HEREBY FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID LIMITED LIABILITY COMPANY.


Executed at Hollywood, Florida, on May 7, 2008.


JOANN MEYER
Authorized Representative
Registered Agent

STATE OF FLORIDA)
COUNTY OF BROWARD) SS

The foregoing Articles of Organization were acknowledged before me on May 7, 2008, by JOANN MEYER, as Authorized Representative/Registered Agent of Credit Save LLC a Limited Liability Company to be formed, who is personally known to me or who has produced N.A. as identification and who did take an oath.




JOAN RICHARDSON
NOTARY PUBLIC, State of Florida
at Large
My commission expires:

DATE May 7, 2008