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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**john castellano, llc.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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**T. HAMPTON**

JUN - 9 2008

**EXAMINER**



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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY**

**ARTICLE I - Name:**

The Name of the Limited Liability Company is:

**JOHN CASTELLANO, LLC.**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

2893 Executive Park Drive  
Suite 104  
Weston, Florida 33331

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

**Perpetual**

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager is:

**JOHN CASTELLANO**  
2893 Executive Park Drive  
Suite 104  
Weston, Florida 33331

By: John Castellano  
Signature of a member or an authorized representative of a member

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

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

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Pursuant to the Management Agreement

**ARTICLE V - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on 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 shall be:

Pursuant to the Management Agreement

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- I. The name of the limited liability company is:

**JOHN CASTELLANO, LLC.**

- II. The name and address of the registered agent is:

**Legal Information Services, Inc.**  
2500 Weston Road,  
Suite 404  
Weston, Florida 33331

*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.*

  
**Roy D. Oppenheim, President, Legal Information Services, Inc.**

John Castellano, L.L.C./ARTICLES.wpx

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