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PICK-UP WAIT MAIL
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Certified Copies Certificates of Status
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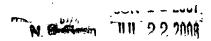


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COVER LETTER

TO: Registration Division of C				
	IST STED	004-504-5	SOLUTTONS	110
SUBJECT:		Liability Company)	002011005	200.
	(Name of Diffice	•		
The enclosed Articles	of Organization and fee(s) are so	ibmitted for filing.		
	spondence concerning this matte			
riease return an corre		•		
	Anoneu	Vame of Person)	ERR	
	(1	Name of Person)		
		Firm/Company)		
	800 1	(Address)	CCHRR 12	
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CLEA	In WATRA, FO	337.6	5	
	(City	State and Zip Code)		
For further informatio	n concerning this matter, please	cell:		
1.	11-	727 -	2040	
/ Think	ne of Person)	at (/2/) 3/7	- 5747 Telenhone Number)	
(1441)	ile of t cison)	(Area code & Dayume	reiephone ivallioer)	
Enclosed is a check	for the following amount:			
	\$130.00 Filing Fee & [C155 OO Filing Fee &	□ \$160.00 Filing Fee,	
<u>-</u> _#125.00 f tillig Fee	Certificate of Status	Certified Copy	Certificate of Status &	
	:	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	
	·		(additional copy is cholosed)	
	Mailing Address	Street/Courier Addr	<u>ess</u>	
	Registration Section	Registration Section		
	Division of Corporations P.O. Box 6327	Division of Corporati Clifton Building	ions	
	Tallahassee, FL 32314	2661 Executive Cent		
		Tallahassee, FL 3230) I	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1ST STEP PONTFOLTO SOLUTIONS LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
710 1 ST AVENUE SW 710 1 ST AVE. SW. LANGO, FLONTOA 33770 LANGO, FL 33770
LANGO, FLONTOA 33770 LANGO, FL 33770
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:
J. A. M. LCC.
Name 1733 LAUNTE LN. Florida street address (P.O. Box NOT acceptable)
BRURATA FL 33756
City, State, 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..

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

n effective date is listed, the date must be specific and cannot be more than five business days pric			Name and Address:
MGNM Annew MTCCAL 1733 LANTE LANA BRECER ATA, FL 3275L COPTIONAL) THE SIGNATURE: Signature of a member or an authorized representative of a member. (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 berein are true.) An are W. S. MILLIFAL	$"MGRM" = M_{\sigma}$		
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing:		5 5	
(Use attachment if necessary) TICLE V: Effective date, if other than the date of filing:	MGRI	M	Andrew MICCAR
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing:	*		1733 LAUNTE LAAR
CICLE V: Effective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be more than five business days price 190 days after the date of filing.) REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (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 berein are true.) Appendix Medical			BRICK ACA, EL 33756
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Andrew S. MILLER	n effective date is li · 90 days after the o	GIGNATURE: Signature of a member (In accordance with se	Per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution
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	n effective date is li · 90 days after the o	Signature of a member of this document constitute that the facts stated !	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury berein are true.)

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)