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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.

hot leads llc

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M. THOMAS

OCT - 1 2008

EXAMINER

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④

ARTICLES OF ORGANIZATION

OF

Hot Leads LLC

The undersigned member, for the purpose of forming a Limited Liability Company under the Laws of the State of Florida, hereby adopts the following Articles of Organization:

ARTICLE I

NAME

The name of the Limited Liability Company shall be:

Hot Leads LLC

ARTICLE II

PURPOSE

The company is organized for any legal and lawful purpose for which a Limited Liability Company may be organized pursuant to the act.

ARTICLE III

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:

9750A West Sample Road

Coral Springs, FL 33065

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ARTICLE IV

INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial agent is:

Melissa Kushner
9750A West Sample Road
Coral Springs, FL 33065

ARTICLE VI

MEMBERS

The Members of the Limited Liability Company shall be:

Managing Member:	Melissa Kushner
Address:	9750A West Sample Road Coral Springs, FL 33065

The undersigned has executed these Articles of Organization this
30th day of September, 2008.

Melissa Kushner
Signature

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(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..

SIGNATURE Melissa Kushner
Melissa Kushner

TITLE Managing Member

DATE 9/30/08

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THESE ARTICLES OF ORGANIZATION, 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.

SIGNATURE Melissa Kushner

DATE 9/30/08

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