

L 09000000533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2009 JAN -5 AM 10: 48
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FILED
09 JAN -5 PM 3:15
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

B. KOHR

JAN - 6 2009

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 839431 5022854

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : December 24, 2008

ORDER TIME : 12:58 PM

ORDER NO. : 839431-005

CUSTOMER NO: 5022854

FILED
09 JAN -5 PM 3:35
TALLAHASSEE
FLORIDA

DOMESTIC FILING

NAME: CRISIS MANAGEMENT SOLUTIONS,
LLC

XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CRISIS MANAGEMENT SOLUTIONS, LLC

(Must end with the words "Limited Liability Company," "LLC," 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:

c/o FREDERICK STERN

13257 PROVENCE DRIVE

PALM BEACH GARDENS, FL 33410

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:

FREDERICK STERN

Name

13257 Provence Drive

Florida street address (P.O. Box **NOT** acceptable)

Palm Beach Gardens FL 33410

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.

FREDERICK STERN


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

STUART GELB
9 MITCHELL DRIVE
KINGS POINT, NY 11024

MGRM

FREDERICK STERN
13257 PROVENCE DRIVE
PALM BEACH GARDENS, FL 33410

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing, _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Richard Klee

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

(In accordance with section 608.408(1), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

RICHARD KLEE

Typed or printed name of signee

Filing Fees: