04000001084

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| . (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Office Use Only



300139379553

01/06/09--01056--006 **155.00

JAN **- 6** 2009

EXAMINER





UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD FOR PICKUP BY UCC SERVICES OFFICE USE ONLY

| | LING & SEARCH | | | January 6, 200 | 9 |
|------------------------------|---------------------------------------|---------------|----------------------|--|--------|
| S | ERVICES | | | E (S) AND DOCUMENT SUMBI | ER (S) |
| | | Victory Finan | icial Services, LLC | Tropies Contraction of the Contr | 8 |
| | Filing Evidence □ Plain/Confirmation | | | Type of Document Certificate of Status | ું |
| | □ Certified Copy | | | Certificate of Good Standing | |
| | | | О | Articles Only | |
| Retrieval Request Photocopy | | est | | All Charter Documents to Incl Articles & Amendments Fictitious Name Certificate | ude |
| | □ Certified Copy | | а | Other | |
| | NEW FILINGS | | AMENDMENTS | | |
| | Profit | A | Amendment | | |
| | Non Profit | R | Resignation of RA Of | ficer/Director | |
| X | Limited Liability | | Change of Registered | Agent | |
| | Domestication | | Dissolution/Withdraw | al | |
| | Other | N | Merger | | |
| | | | | | |
| | OTHER FILINGS | R | REGISTRATION/QU | JALIFICATION | |
| | Annual Reports | F | oreign | | |
| | Fictitious Name | L | imited Liability | | |
| | Name Reservation | R | Leinstatement | | |
| | Reinstatement | Т | rademark | | |
| | | |)ther | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

VICTORY FINANCIAL SERVICES, 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: | Maning Address: | |
|------------------------------|------------------------------|--|
| 1211 N. Westshore Blvd. #105 | 1211 N. Westshore Blvd. #105 | |
| Tampa, FL 33607 | Tampa, FL 33607 | |
| | | |

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:

| Christopher L. Gosiin | | | | | | |
|------------------------------|--|--|--|--|--|--|
| Name | | | | | | |
| 1211 N. Westshore Blvd. #105 | | | | | | |
| | Florida street address (P.O. Box NOT acceptable) | | | | | |
| Tampa | _{FL} 33607 | | | | | |
| | City State and Zin | | | | | |

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)

(CONTINUED)
Page 1 of 2

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

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

| Title: | Name and Address: | | | | | |
|---|---|--|--|--|--|--|
| "MGR" = Manager "MGRM" = Managing Member | | | | | | |
| MGRM | Christopher L. Goslin | | | | | |
| | 1211 N. Westshore Blvd. #105 | | | | | |
| | Tampa, FL 33607 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| (Use attachment if necessary) | (Use attachment if necessary) | | | | | |
| ARTICLE V: Effective date, if other than (If an effective date is listed, the date muto or 90 days after the date of filing.) | n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior | | | | | |
| REQUIRED SIGNATURE: | | | | | | |

(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.)

Robert F. Gilhooley

Typed or printed name of signee

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)