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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 : FASTKIT CORPORATE OUTFITS  
Account Number : 071001002335  
Phone : (305) 599-0839  
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TALLAHASSEE, FLORIDA

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## DEBT REDUCTION SOLUTIONS, LLC

Certificate of Status	0
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JUL 29 2009

EXAMINER

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

**ARTICLE I - NAME:**

The name of the Limited Liability Company is:

**DEBT REDUCTION SOLUTIONS, LLC**

**ARTICLE II - ADDRESS:**

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

1760 South 3<sup>rd</sup> Street  
Jacksonville Beach, FL 32250

**ARTICLE III - REGISTERED AGENT NAME, OFFICE & SIGNATURE:**

The name and Florida street address of the registered agent are:

Grant Momberg  
1760 South 3<sup>rd</sup> Street  
Jacksonville Beach, FL 32250

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 908, Florida Statutes.

  
\_\_\_\_\_  
Registered Agent's Signature

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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:

Name & Address:

Managing Member

Grant Momberg  
1760 South 3<sup>rd</sup> Street  
Jacksonville Beach, FL 32250

Managing Member

Matthew Wilcox  
1760 South 3<sup>rd</sup> Street  
Jacksonville Beach, FL 32250

Managing Member

Shane Haslauer  
1760 South 3<sup>rd</sup> Street  
Jacksonville Beach, FL 32250

Managing Member

Davis & Stephenson Holding, LLC  
521 SW 11<sup>th</sup> Court  
Fort Lauderdale, FL 32215

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member

Grant Momberg

(In accordance with section 608.406(3), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 JUL 28 AM 8:30

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