

## Florida Department of State

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To:

Division of Corporations

Fax Number : (350)617-6383

from:

Account Name : CSH SERVICES, LLC

Account Number: 120070000160 Phone: (800)494-3124 Fax Number: (561)455-9885

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## **ELORIDA/FOREIGN LIMITED LIABILITY CO.**

### ANF SOLUTIONS, LLC

Certificate of Status	0
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D. BRUCE

SEP 17 2009

**EXAMINER** 

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Help

4-09000202274-3

# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

#### ARTICLE I NAME

The name of the Limited Liability Company is:

ANF SOLUTIONS, LLC

#### ARTICLE II ADDRESS

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

837 MONTICELLO COURT

CAPE CORAL, FLORIDA 33904

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent a

SCOTT W FOSTER 837 MONTÍCELLO COURT CAPE CORAL, FLORIDA 33904 9 SEP 16 AM 9: 49

Having been named as registered agent 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.

SCOTT W FOSTER / Registered Agent's signature

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PAGE 2 ANF SOLUTIONS, LLC

#### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

### ARTICLE V MEMBERS (optional)

MANAGING MEMBER
SCOTT W FOSTER
837 MONTICELLO COURT
CAPE CORAL, FLORIDA 33904

SECRETARY OF STATE

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 herein are true.

SCOTT W FOSTER