# L09000108969

(Requestor's Name)							
(Address)							
(Address)							
(Addless)							
(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



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## **COVER LETTER**

TO:	Registration Division of C		
SUBJI	ECT:	Credit	Card Process 4 Less
		Name of Limi	ted Liability Company
The en	closed Articles	of Organization and fee(s) are	submitted for filing.
Please	return all corre	spondence concerning this mat	tter to the following:
			Barry Lynn Name of Person
			Name of Ferson
		Barry Lynn M	Marketing and Advertising
			Firm/Company
		36	650 N. 52 Ave.
			Address
		Hollyw	vood, Florida 33021
		Ci	ty/State and Zip Code
		E-mail address: (to be used	lynn7@yahoo.com for future annual report notification)
For fur	ther information	n concerning this matter, pleas	•
Bar		keting and Advertising	at ( 954 ) 558-0886  Area Code & Daytime Telephone Number
Enclos	sed is a check	for the following amount:	
<b>]\$</b> 125.	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam The name of the Lin	ne: mited Liability Company is	:			
(Mus	Credit Card Procest end with the words "Limited Liab	cess 4 Less LLC.	)		
ARTICLE II - Add The mailing address		rincipal office of the Limite	d Liability Cor	npany	y is:
Principal Office A	ddress:	Mailing Address:			
3650 N. 52 Ave. Hollywood, Fl. 330	021	Same			
(The Limited Liability Cobusiness entity with an a	egistered Agent, Registere mpany cannot serve as its own Regictive Florida registration.)  Florida street address of the Barry	Lynn	ent's Signatur individual Pranche IAHASSEE, FI	<sub>ដ</sub> ល្វ NOV 10 PM 2:	
	OR LE	 			
	Florida street address (P.O. Box NOT acceptable)				
	Hollywood, 33021 FL FL				
	City, State,	and Zip			
liability compar registered agent an statutes relating t	ny at the place designated in nd agree to act in this capact to the proper and complete p	accept service of process for this certificate, I hereby accordity. I further agree to comply berformance of my duties, and istered agent as provided for	ept the appointn with the provis d I am familiar	nent a sions o with a	is of all and

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: "MGR" = Manager "MGRM" = Managing	Name and Address:  g Member		
MGR	Barry Lynn		
*** <u>**</u> **	3650 N. 52 Ave.	_	
	Hollywood, Fl. 33021	_	
		_	
MGR	Paul Goldstein	<del> </del>	
	5418 Oak Canopy Way	_	
	Ft. Lauderdale, Fl. 33312	_	
-		_	
		<del></del>	
		_	
(Use attachment if nec	paccary)	_	
(Ose attachment if net	ocssal y)		
FICLE V: Effective date, n effective date is listed, t	if other than the date of filing: (OPTION ). (OPTION ).	ONAL) s days p	rior
90 days after the date of			
REQUIRED SIGNA	Tay Hillest . =	s <b>9</b>	
Sign	ature of a member or an authorized representative of a member.	<u>.</u> ₩	-
of t	accordance with section 608.408(3), Florida Statutes, the execution his document constitutes an affirmation under the penalties of perjury the facts stated herein are true.)	01 NON 60	<u> </u>
	Paul Goldstein	<b>₹</b>	П
<del></del>	Typed or printed name of signee	رز ک <u>ا</u>	
Filing Fees:	<u> </u>		_
\$125 On Filing Fee fo	r Articles of Organization and Designation	n <b>v</b> o	

Page 2 of 2

of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)