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SECHETARY OF STATE
ALLAHASSEE, FLERIDA

T. CLINE

DEC - 3 2009

EXAMINER

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 24, 2009

THOMAS LUND 4001 TAMIAMI TRAIL NORTH, SUITE 350 NAPLES, FL 34103

SUBJECT: CORE FORUMS, LLC Ref. Number: W09000051694

We have received your document for CORE FORUMS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II ng of your document, please call

COVER LETTER

то:	Registration Section Division of Corporations									
SUBJE	CCT: Core F	orums, LLC	2							
~ -	Name of Limited Liability Company									
	closed Articles of Organization and fee(s) are submitt return all correspondence concerning this matter to th	_	•							
	Thomas "Chad" Lund									
	Name of	of Person								
	Lund Car	oital Group								
	Firm/C	Company		<u></u>						
	4001 Tamiami Tra	il North, Su	ite 350			2				
,	Ad	dress			<u> </u>	100				
	Naples, Florida 34103									
•	City/State and Zip Code									
-		dcapital.con				MIII: 05				
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:										
	Chad Lund at (239	,	213-1955						
	Name of Person	Area Code	& Daytime Te	lephone Number						
Enclosed is a check for the following amount: \$\frac{1}{2}\$125.00 \text{ Filing Fee} \text{ \$\frac{1}{2}\$130.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}} \$\frac{1}{2}\$155.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}} \$\frac{1}{2}\$160.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\frac{1}{2}\$155.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}} \$\frac{1}{2}\$155.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}} \$\frac{1}{2}\$160.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}} \$\frac{1}{2}\$160.00 \text{ Filing Fee, Certified Copy (additional copy is enclosed)}}{2}										
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration of Clifton B 2661 Exe	ourier Addression Section of Corporation uilding cutive Center ee, FL 32301	ns · Circle						

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:
	ore Forums, LLC
(Must end with the words "Li	imited Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4001 Tamiami Trail North	4001 Tamiami Trail North
Suite 350	Suite 350
Naples, Florida 34103	Naples. Florida 34103
The name and the Florida street addres	South Pine Island Road South Pine Island Road ROAD AND AND AND AND AND AND AND AND AND A
1200	South Pine Island Road
Florida street ad	Idress (P.O. Box NOT acceptable)
Plantation	FL 33324
Ci	ity, State, and Zip
liability company at the place desig registered agent and agree to act in this statutes relating to the proper and co accept the obligations of my position By:	and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all amplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 608, F.S Apportation System The ent's Signature (REQUIRED)
	Madonna Cuddihy

(CONTINUED)

FL052 - 05/06/2009 C T System Online

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:

<u>Title:</u> "MGR" = Manager "MGRM" ≈ Managing Me	Name and Address:	
MGR	Thomas "Chad" Lund 4001 Tamiami Trail North, Suite 350	
	Naples, Florida 34103	
· · · · · · · · · · · · · · · · · · ·		20
(Use attachment if necessar		9050
ARTICLE V: Effective date, if oth (If an effective date is listed, the date or 90 days after the date of filing	ate must be specific and cannot be more than five business	days prior
REQUIRED SIGNATUR	E:	: :
Signature	of a member or an authorized representative of a member.	
of this do	ance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of perjury cts stated herein are true.)	
Thom	as "Chad" Lund, Manager	
	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)