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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

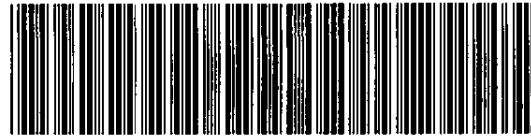
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
10 JUL 27 PM 3:32
CLERK OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

AUG 12 2010

EXAMINER

S. HAWKES

~~JUL 28 2010~~

EXAMINER

110-25435



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2010

MIRIAM RICHTER, ESQ
600 S ANDREW AVE SUITE 406
FORT LAUDERDALE, FL 33301

SUBJECT: CARD, L.L.C.
Ref. Number: W10000035435

We have received your document for CARD, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6955.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 210A00018264

Miriam Richter, Attorney at Law, P.L.

600 South Andrews Avenue, Suite 406

Fort Lauderdale, Florida 33301

954-463-4592

954-527-7997 facsimile

mrichter@RichterTrademarks.com

July 23, 2010

Florida Department of State

Registration Section

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

To Whom it May concern:

Enclosed are the Articles of Organization for the CARD Limited Liability Company which are accompanied by the appropriate filing fee. The purpose of the Company is to engage in any lawful act or activity for which a Limited Liability Company may be formed under the Limited Liability statutes of the State of Florida. The effective date of the creation of the company is July 23, 2010.

Thank you,

A handwritten signature in black ink, appearing to read 'Miriam Richter', with a stylized flourish at the end.

Miriam Richter, Esq

authorized representative of CARD, L.L.C.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CARD, L.L.C.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Miriam Richter, Esq.

Name of Person

Miriam Richter, Attorney at Law, P.L.

Firm/Company

600 S. Andrews Avenue, Suite 406

Address

Fort Lauderdale, Florida 33301

City/State and Zip Code

mrichter@RichterTrademarks.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Miriam Richter, Esq.

Name of Person

at (954) **463-4592**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
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

Miriam Richter, Attorney at Law, P.L.

600 South Andrews Avenue, Suite 406

Fort Lauderdale, Florida 33301

954-463-4592

954-527-7997 facsimile

mrichter@RichterTrademarks.com

August 6, 2010

Florida Department of State

Division of Corporations - Attn: Suzanne Hawkes

P.O. Box 6327

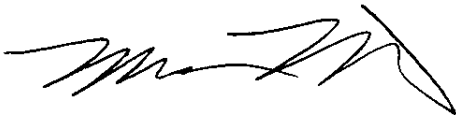
Tallahassee, Florida 32314

Re: W10000035435

Ms. Hawkes:

Thank you for taking the time to speak with me this week. I have amended the documents and am returning them to you. The new name of the LLC will be CARDS MD L.L.C. instead of CARD, L.L.C. All other information remains the same. Please let me know if you require any additional documents to be amended in order to proceed with the filing and I will forward them as well.

Thank you again,

A handwritten signature in black ink, appearing to be 'Miriam Richter', written in a cursive style.

Miriam Richter, Esq

authorized representative of CARDS MD L.L.C.

encl.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CARDS MD L.L.C.

(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:

600 S. Andrews Avenue, Suite 406

Fort Lauderdale, Florida 33301

Mailing Address:

same

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:

Miriam Richter, Esq.

Name

600 S. Andrews Avenue, Suite 406

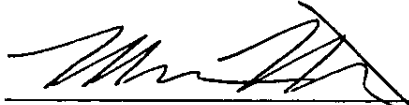
Florida street address (P.O. Box **NOT** acceptable)

Fort Lauderdale

FL 33301

City, State, and Zip

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

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10-3-27 PM 3:37
CLERK OF STATE
TALLAHASSEE, FLORIDA

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 Member

MGR

Name and Address:

Miriam Richter, Esq.

600 S. Andrews Avenue, Suite 406

Ft. Lauderdale, FL 33301

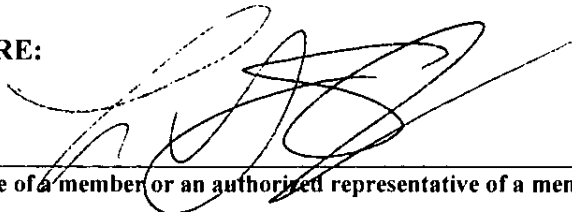
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10 JUN 21 PM 3:32
CLERK OF STATE
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: July 23, 2010. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:


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.)

Lawrence Shapiro

Typed or printed name of signer

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)