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#### FLORIDA LIMITED LIABILITY CO.

Catalyst Capital Group, LLC

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### FAX AUDIT # <u>H100002116223</u>

# ARTICLES OF ORGANIZATION OF Catalyst Capital Group, LLC

**ARTICLE I** 

NAME

The name of the limited liability company shall be: Catalyst Capital Group, LLC

**ARTICLE II** 

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 4350 Oakes Road #516, Davie, Florida 33314.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Roxanne Hurlburt, 4350 Oakes Road #5165 Davie, Florida 33314. Located in the County of Broward.

**ARTICLE IV** 

DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the names and addresses of the managers of the Limited Liability Company are: Richard E. Huff, 4350 Oakes Road #516, Davie, Florida 33314

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

Date: September 8, 2010

WI 53717

608-827-5300

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FAX AUDIT # H100002116223

## FAX AUDIT # H/00002/1622 3

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Catalyst Capital Group, LLC

The name and address of the registered agent and office is Roxanne Hurlburt, 4350 Oakes Road #516, Davie, Florida 33314. Located in the County of Broward.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Roxanne Hurlburt

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