

#L10000118623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

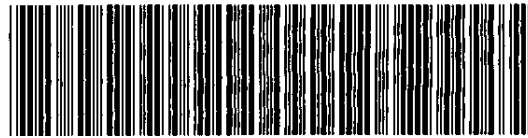
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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K. SALY  
EXAMINER  
NOV 15 2010

**Debra A. Lyonnais**  
**2801 NE 21<sup>st</sup> Court**  
**Ft. Lauderdale, FL 33305**  
**954-554-4655**

November 10, 2010

VIA: Express Mail

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301  
(850) 245-6051

Re: Dale Marketing Group, LLC / 2801 NE 21<sup>st</sup> Court / Ft. Lauderdale, FL 33305  
LLC Articles of Organization Documents for Filing : Florida

To whom it may concern:

Enclosed is a check for \$160.00 made payable to the Florida Dept of State. This check is for the attached Filing Fee, Certificate of Status and a returned Certified Copy of the filing document.

Two executed copies of the Articles of Organization document are enclosed. Please return one certified copy to the below.

Robert Miller  
Fay Management  
939 W. North Avenue, Suite 680  
Chicago, IL 60642

If questions or concerns please do not hesitate to call Mr. Robert Miller at 847-989-2765 or myself at 954-554-4655.

Sincerely,

  
Debra Lyonnais

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dale Marketing Group, LLC  
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:

Robert Miller

Name of Person

Fay Management

Firm/Company

939 W. North Ave. : Suite 680

Address

Chicago, IL 60642

City/State and Zip Code

millerbob56@aol.com

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

For further information concerning this matter, please call:

Robert Miller

Name of Person

at ( 847 ) 989-2765

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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 - Name:

The name of the Limited Liability Company is:

Dale Marketing Group, LLC

(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:

Dale Marketing Group  
2801 NE 21st Court  
Ft. Lauderdale, FL 33305

#### Mailing Address:

Dale Marketing Group  
2801 NE 21st Court  
Ft. Lauderdale, FL 33305

### 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:

Debra Lyonnais

Name

2801 NE 21st Court

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

Ft. Lauderdale FL 33305

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)

**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

**Name and Address:**

MGRM

Debra A. Lyonnais

2801 NE 21st Court

Ft. Lauderdale, FL 33305

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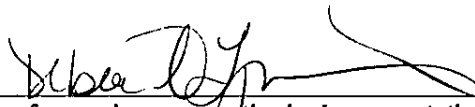
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

**Debra A. Lyonnais**

\_\_\_\_\_  
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)**