

**L10000185172**

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : LLOYD GRANET  
Account Number : 074632001025  
Phone : (561) 999-9300  
Fax Number : (561) 999-9400

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**FLORIDA LIMITED LIABILITY CO.**

**LM Financing LLC**

Certificate of Status	1
Certified Copy	0
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the limited liability company is:

**LM FINANCING LLC**

**ARTICLE II - Address:**

The street and mailing address of the principal office of the limited liability company is:

c/o

**Lloyd Granet, P.A.  
2295 NW Corporate Boulevard, Suite 235  
Boca Raton, FL 33431-7330**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and Florida street address of the registered agent are:

**Lloyd Granet, P.A.  
2295 NW Corporate Boulevard, Suite 235  
Boca Raton, FL 33431-7330**

*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.*

By: Registered Agent's Signature

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).

Signature of a member or an authorized representative of a member

**Lloyd Granet**  
Typed or printed name of signee

Lloyd Granet, Esq., 2295 NW Corporate Boulevard, Suite 235, Boca Raton, FL 33431-7330  
Ph. 561-999-9300; Fax 561-999-9400; Florida Bar No. 525431; Fax Audit: H10000261835 3

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