

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : HUBCO
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FLORIDA LIMITED LIABILITY CO.
MSFN LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
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TALLAHASSEE, FLORIDA

G. MCLEOD

JAN 26 2011

EXAMINER

H11000020839

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **MSFN LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

3080 Grand Bay Boulevard, Apt. 526

3080 Grand Bay Boulevard, Apt. 526

Longboat Key, FL 34228

Longboat Key, FL 34228

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

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

Frank Nocco

Name

3080 Grand Bay Boulevard, Apt. 526

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Longboat Key, FL 34228

(City / State / Zip)

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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 - Frank Nocco

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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

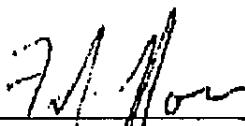
Frank Nocco - 3080 Grand Bay Boulevard, Apt. 526, Longboat Key, FL 34228

MGRM

Michael Sherman - 522 Shore Road, Apt. 5DD, Long Beach, FL 11561

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Frank Nocco

Typed or printed name of signer