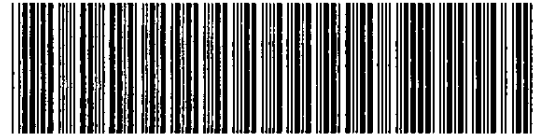


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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 FEB -8 PM 1:03

EFFECTIVE DATE 2/2/2011

B. KOHR

FEB 11 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

EFFECTIVE DATE 2/2/2011

SUBJECT: BETTY J. ROBINSON 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:

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
11 FEB -8 PM 1:03

CATHERINE E. FLEMING
Name of Person

Betty J. Robinson Group LLC
Firm/Company

11060 NW 20th CT
Address

SUNRISE FL 33322
City/State and Zip Code

CE.FLEMING14@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CATHERINE E. FLEMING at (754) 779 0235
Name of Person 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

EFFECTIVE DATE 2/2/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BETTY J. ROBINSON GROUP, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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DIVISION OF CORPORATIONS
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ARTICLE II - Address:

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

Principal Office Address:

11060 NW 20th CT
SUNRISE, FL 33322

Mailing Address:

P. O. BOX 4668
10974
N. Y. N. Y. 10163

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:

Leading Edge Investments Inc
Name

11060 NW 20th CT
Florida street address (P.O. Box **NOT** acceptable)

SUNRISE 1 FL 33322
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..

Catherine H. Lewis for Leading Edge Investments Inc
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:

MGR

Betty Robinson
1844 W NOB Hill Rd #262
PLANTATION FL 33322

MGR

CATHERINE E. FLEMING
11060 NW 20th CT
SUNRISE, FL 33322

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 02-02-2011 (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:

Catherine E. Fleming
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.)

CATHERINE E. FLEMING
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)