L11000092390

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

B. KOHR AUG 1 1 2011

EXAMINER



100210878031

08/11/11--01001--013 **620.00

RECEIVED

11 AUG 11 AH 11: 07

10 AUG 12 AH 11: 07



	155,
CORPORATE / When you need ACCESS to the world" ACCESS,	
INC. 236 East 6th Avenue . Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (8.6)	50) 222-1666
WALK IN	, mang
PICK UP: B/il/11 Alma	A AUG
CERTIFIED COPY	
РНОТОСОРУ	PR TOTAL
Cus	29
FILING LC	
I. Intercoastal Payroll Solutions, .	LLC
(CORPORATE NAME AND DOCUMENT #)	
(CORPORATE NAME AND DOCUMENT #)	
	11 AUS
(CORPORATE NAME AND DOCUMENT #)	
(CORPORATE NAME AND DOCUMENT #)	

SPECIAL INSTRUCTIONS:

6.

(CORPORATE NAME AND DOCUMENT #)

ARTICLES OF ORGANIZATION OF INTERCOASTAL PAYROLL SOLUTIONS, LLC

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I — Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "INTERCOASTAL PAYROLL SOLUTIONS, LLC."

ARTICLE II — Address:

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

Mailing Address

199 Avenue K, SE

Winter Haven, FL 33880

Street Address:

199 Avenue K, SE

Winter Haven, FL 33880

ARTICLE III — Registered Agent and Registered Office

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

John W. Dial 199 Avenue K, SE Winter Haven, FL 33880

ARTICLE IV — Limitation on Agency Authority of Members:

Pursuant to Section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 10^{4} day of August, 2011.

Signature of authorized representative

JOHN W. DIAL

Typed or printed name of signee

(In accordance with Section 608.408(3), <u>Florida Statutes</u>, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with Section 608.408(3), <u>Florida Statutes</u>, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Signature of Registered Agent

JOHN W. DIAL

Typed or printed name of signee