

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.
Account Number : 076077000521
Phone : (954) 527-2428
Fax Number : (954) 333-4028

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Zevuloni & Associates, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
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11 AUG 17 AM 6:52
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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August 17, 2011

Florida Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: ZEVULONI & ASSOCIATES, INC.
ZEVULONI & ASSOCIATES, LLC

Dear Madam/Messr:

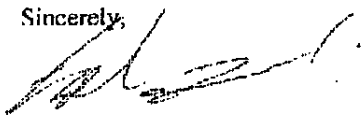
Please accept this correspondence as an addendum to the filing of the Articles of Organization for ZEVULONI & ASSOCIATES, LLC.

On September 7, 2005, ZEVULONI & ASSOCIATES, INC., document number P05000122808 was registered to do business in the State of Florida to do business with myself, serving as sole Director and Officer of the corporation. I now wish to form ZEVULONI & ASSOCIATES, LLC, as indicated on the attached Articles of Organization.

I hereby state that with this amendment, I authorize the use of the name ZEVULONI & ASSOCIATES, LLC, to form a limited liability company to do business in Florida.

Should you have any questions, please refer them to Anne Sallee, Corporate Paralegal at Ruden McClosky P.A. (954-527-2428).

Sincerely,



Joseph Zevuloni
President, Zevuloni & Associates, Inc.

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**ARTICLES OF ORGANIZATION
OF
ZEVULONI & ASSOCIATES, LLC
a Florida Limited Liability Company**

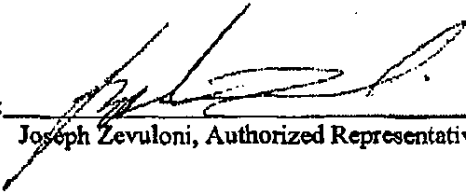
The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida does set forth the following:

1. NAME. The name of the Limited Liability Company is ZEVULONI & ASSOCIATES, LLC (the "Company").

2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing address for the Company is: 3050 Aventura Blvd., Third Floor, Aventura, FL 33180.

3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: CT CORPORATION SYSTEM, 1200 S. Pine Island Rd., Plantation, Florida 33324.

The undersigned has executed these Articles of Organization on the 16th day of August, 2011.

By: 
Joseph Zevuloni, Authorized Representative

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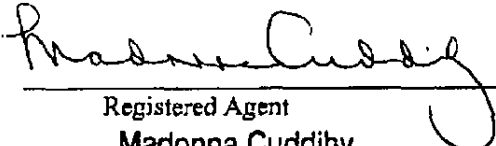
**CERTIFICATION OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: ZEVULONI & ASSOCIATES, LLC.
2. The name and address of the registered agent and office is:

CT CORPORATION SYSTEM
1200 S. Pine Island Rd.
Plantation, Florida 33324

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 its 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.



Registered Agent
Madonna Cuddihy
Special Assistant Secretary

8-17-2011
(Date)

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