Dec 22 2011 6:22PM

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (950)617-6363

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160

: (800)494-3124

Phone Fax Number

: (561)455-9805

**Enter the email address for this business entity to be used for future annual report maddings. Fotor call. annual report mailings. Enter only one email address please, **

Email Address:



FLORIDA LIMITED LIABILITY CO. ECLDS, LLC

<u>Ставить принадация нарагруменняю намара должать у водологою в нара</u>	<u> Spekerskynters og er militære i 1990 er en l</u>
Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$125.00

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ECLDS, LLC

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

ARTICLE II - Address;

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

Principal Office Address:

Mailing Address:

31 MILK STREET, SUITE 401

BOSTON, MA 02109

31 MILK STREET, SUITE 401 BOSTON, MA 02109

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:

SUPERBIZ REGISTERED AGENT, INC.

Name

2761 Vista Parkway, Unit E-4

Florida street address (P.O. Box NOT acceptable)

West Palm Beach

_E, 33411

City, \$tate, 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..

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(CONTINUED)

H110002994853

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<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	JAMES M. KITTLER
WOIL	31 MILK STREET, SUITE 401
	BOSTON, MA 02109
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