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D. BRUCE
FEB 1 3 2012
EXAMINER

COVER LETTER

T 0 :	Registration Division of	n Section Corporations					
SUBJE	CT. Con	nmerce & Presenc	e LLC				
SCDGL		Name of Limi		Company		_	
The end	closed Article	s of Organization and fee(s) are	submitted for	or filing.			
Please	return all corr	espondence concerning this mat	ter to the fol	llowing:			
	Paul E	Alfred					
-			Name of Pe	rson	· <u>,</u>		
			Firm/Comp	any			
	1317 St	Tropez Circle #13	03				
•		A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Address	;			
١	Weston,	FL 33326					
•		Ci	ty/State and Z	Lip Code			
_	ebin@cor	nmerceandpresence.c			<u> </u>		
Б. С.	a	E-mail address: (to be used		mai report notification)		2 FE	
For fur	ther information	on concerning this matter, pleas	e call:	•	HAS	8 .	1
Paul	Alfred		_ at (845			. O .	T
	Nai	me of Person	Ar	ea Code & Daytime Te	elephone Number		j
Enclos	ed is a check	for the following amount:			R A T	ණ ය	
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certifi	00 Filing Fee & ied Copy onal copy is enclosed)	\$160.00 Filing Certificate of St Certified Copy (additional copy is	atus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Re Di CI 26	ereet/Courier Address egistration Section ivision of Corporatio lifton Building 661 Executive Center allahassee, FL 32301	ns · Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	ΕI	- Nai	ne:
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The name of the Limited Liability Company is:

Commerce & Presence LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:		
1317 St Tropez Circle	1317 St Tropez Circle		
#1303	#1303		
Weston, FL 33326	Weston, FL 33326		
(The Limited Liability Company cannot ser business entity with an active Florida regis The name and the Florida street a Paul E Alfu	ed Name Name Name	or and FEB 10	

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 (REQUIRED)

(CONTINUED)

Title:	N 1 A 1 1
	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
WORW — Managing Member	
MGRM	Paul E Alfred
	1317 St Tropez Circle
	Weston, FL 33326
	
(Use attachment if necessary)	
(Use attachment if necessary)	
LE V: Effective date, if other than the	ne date of filing: (OPTIONAL)
LE V: Effective date, if other than the fective date is listed, the date must	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days prio
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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)