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(Re	equestor's Name)	
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SECRETARY OF STATE SECRETARY OF CORPORATIONS 12 HAR -9 P.H 2: 36

COVER LETTER

TO: Registration Section Division of Corporations	ep. 3
SUBJECT: Accounting Firms For Sale, L	LC
Name of Limited Liability Comp	
The enclosed Articles of Organization and fee(s) are submitted for filing	. §
Please return all correspondence concerning this matter to the following	ž.
Morton Taubman	, o
Name of Person	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Hunter Taubman Weiss	
Firm/Company	
1201 15th Street, N.W. Second	Floor
Address	
Washington, D.C. 20005	
City/State and Zip Code	е
mtaubman@htwlaw.com E-mail address: (to be used for future annual repo	
·	ort notification)
For further information concerning this matter, please call:	
Morton Taubman at (202	347-9090
Name of Person Area Code	e & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\int \\$130.00 Filing Fee & Certified Co	· ·

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Accounting Firms For Sale, 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:
411 Walnut Street, Unit 9124	Same
Glen Cove Springs, Florida 32043	

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:

Barry J. Friedman
Name
411 Walnut Street, Unit 9124

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

Glen Cove Springs, FL 32043

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..

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:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
Manager	Barry J. Friedman 411 Walnut Street, Unit 9124
	Glen Cove Springs, Florida 32043
	
(Use attachment if necessary)	
	ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
11	

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.)

Barry J. Friedman

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)