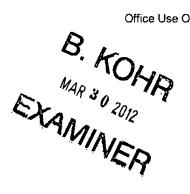
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PICK-UP	☐ WAIT	MAIL
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# **COVER LETTER**

то:	Registration of	on Section Corporations		
SURI	ECT: sh	o LAW FIRM, P.L.I	L.C.	
3020			ted Liability Company	
The en	nclosed Article	es of Organization and fee(s) are	submitted for filing.	
Please	return all con	respondence concerning this mat	ter to the following:	92.0
	S. How	ard Orner		2 mg 28 mg
			Name of Person	20
	shoL	AW FIRM, P.L.L.C		
			Firm/Company	
	2000 G	lades Rd., suite 31	2	
			Address	<del>_</del>
	Boca Ra	ton, FI 33431		
			ty/State and Zip Code	
	sho@the	ornerfirm.com  E-mail address: (to be used	for future annual report notification)	
For fu	rther informati	ion concerning this matter, pleas	•	
S. H	loward Ori	ner	at (561 ) 347-1336	
	Na	me of Person	Area Code & Daytime Telep	phone Number
Enclo	sed is a checl	k for the following amount:		
\$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Clarations Tallahassee, FL 32301	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# shoLAW FIRM, P.L.L.C.

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

The company will engage in the practice of law.

## **ARTICLE II - Address:**

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

Principal Utilice Address:	Mailing Address:
2000 Glades Road, suite 312	2000 Glades Road, suite 312
Boca Raton, Fl. 33431	Boca Raton, Fl. 33431

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:

S. Howard Orn	er
	Name
2000 Glade	s Road, suite 312
Florid	a street address (P.O. Box NOT acceptable)
Boca Raton	<sub>FL</sub> 33431
	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..

/s/ S. HOWARD ORNER

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

## 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	r
MGRM	S. Howard Orner
	2000 Glades Road, suite 312
	Boca Raton, Florida 33431
<del></del>	
(Harata alamana (Caranana)	
(Use attachment if necessary)	
	an the date of filing: March 26, 2012 . (OPTIONA
effective date is listed, the date m O days after the date of filing.)	nust be specific and cannot be more than five business day
DECLIDED CLONATUDE.	
REQUIRED SIGNATURE:	
	MGRM
1///n	making making

(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.)

S, Howard Orner

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)