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2012 AUG -9 AH BH 32
SECRETARY OF STATE

J. SAULSBERRY EXAMINER

AUG 10 2012

Article of Organization
For The Boomer Group LLC

Paid Frohmon 48 Marine WAY Delray Beach F1 33483

305 -610 -6619

Forms on Check for \$125

SECRETARY OF STATE ALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
The Boomer group L. L. C	•	
(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 L	iability Company is:	
Principal Office Address: Mailing Address:		
48 Marine WAY 48 Marine	w AY	
48 Marine WAY Delray Beach Fl 33483 Delray Beach 333	4.F1	
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:	781 SI	
DAUID FROLMON Name 48 Marine WAY	7017 AUG -9 AH 8: 32 SECRETARY OF STATE TALLAHASSEF, FLORIDA	
Name	ASS IN	
48 Marine WAY	AUG -9 M S AHASSEE, FL	
Florida street address (P.O. Box NOT acceptable)	OF STA	
Delkoy Beach FL 33483 City, State, and Zip	A S	
City, State, and Zip		
Having been named as registered agent and to accept service of process for the	ahove 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 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:**

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 States constitutes a third degree felony as provided for in s.817.155, F.S.)

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)

COVER LETTER

- · ·
TO: Registration Section Division of Corporations
SUBJECT: The Boomer group L.L.C. Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAUID FROHMAN Name of Person
Name of Person
The BOONES GROUP
Firm/Company
48 Marine WAY Address
Address
Delan Benef fl 3348 Code The first further information concerning this matter please colling to the first flow of the first flow of the f
City/State and Zip Code DAUID FROH MAN O AOL. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DAUID FROHMAN 305 6/0 66/9
VIVID FICO #4170 at (303) 6/0 66/7 >
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status 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 Street/Courier Address Registration Section Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301