

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L12000129695
FILED 8:00 AM
October 08, 2012
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
WEALTH MANAGEMENT CONSULTANTS, L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:
9715 WEST BROWARD BLVD
PMB 158
PLANTATION, FL. 33324

The mailing address of the Limited Liability Company is:
9715 WEST BROWARD BLVD
PMB 158
PLANTATION, FL. 33324

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
KRISTIN M. LITTS, JD, LLM, LLC
304 SWALLOWTAIL LANE
SEBASTIAN, FL. 32958

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.

Registered Agent Signature: KRISTIN M. LITTS, JD, LLM, LLC

Article V

The name and address of managing members/managers are:

Title: MGRM
KRISTIN M. LITTS, JD, LL.M, LLC
304 SWALLOWTAIL LANE
SEBASTIAN, FL. 32958

Title: MGRM
BLACK ISLE CONSULTING, LLC
9715 WEST BROWARD BLVD PMB 158
PLANTATION, FL. 33324

L12000129695
FILED 8:00 AM
October 08, 2012
Sec. Of State
nculligan

Signature of member or an authorized representative of a member

Electronic Signature: KRISTIN M. LITTS, JD, LL.M

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

CM 11a 84 30 30 p.1
L12000129695

KRISTIN M. LITTS, J.D., LL.M.

October 11, 2012

SENT VIA FACSIMILE: 850.245.6030

Neysa Culligan
Regulatory Specialist
Florida Department of State
Division of Corporations

Re: Wealth Management Consultants, LLC
Document No.: L07000068797

To Whom It May Concern:

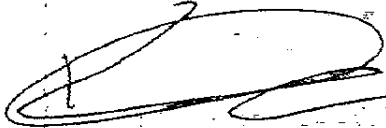
500240520405

As a 51% member of administratively dissolved entity, Wealth Management Consultants, LLC, I hereby acknowledge that I have no intention of reinstating the aforementioned entity and do hereby release the name for use to another entity.

If you have any questions in this regard, please feel free to contact me at 877.307.3075.

Thank you for your attention in this matter.

Very truly yours,



Kristin M. Litts, JD, LLM

RECEIVED
12 OCT 11 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9715 W. Broward Blvd.
PMB 168
Plantation, FL 33324

Phone: 877.307.3075
Fax: 800.578.8308
wmcadmin@wmclic.net

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: October 9, 2012


Signature of Party

Printed Name: Kristin M. Litts

Address: 304 Swallowtail Lane

City, State, Zip: Sebastian, FL 32958

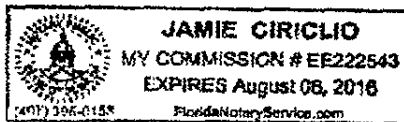
Telephone Number: 772.766.9671

Fax Number: 800.578.8308

STATE OF FLORIDA

COUNTY OF INDIAN RIVER

Sworn to or affirmed and signed before me on 10/8/12 by PERSONAL Appearance




NOTARY PUBLIC or DEPUTY CLERK

JAMIE CIRICLIO

[Print, type, or stamp commissioned name of notary or clerk.]

☒

Personally known

☐

Produced Identification

Type of Identification produced