130008272

(Requestor's Name)		
(Address)		
(Address)		
(Cir	ty/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL.
(Business Entity Name)		
(Document Number)		
(50	· .	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		ļ

Office Use Only

JAN 16 2013 G. McLEOD



500243449675

01/14/13--01005--014 **160.00

13 JAN IL AMII: 22 SEUBLIAARY DE STATE ALI ENASSEE FLORIN Thomas R. Ness

Attorney at Law 340 Nell Road East Berlin, PA 17316 (717)-259-1111 fax: 259-0521

thomasnell@verizon.net

Licensed to Practice in Florida and Pennsylvania

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Subject: Affinity Revenue Services, LLC

Date: January 4, 2013

The enclosed Articles of Organization and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas R. Nell, Esq. 340 Nell Road East Berlin, PA 17316

Thomas R. Nell at (717)-259-1111

Enclosed is a check for the following amount:

\$160.00 filing fee, certificate of status & Certified copy (additional copy is enclosed

If there are any further requirements, write, call, or e-mail.

Thanks,

Thomas R. Nell, Esq.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Affinity Revenue Services, 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:

73 Isle of Venice Drive Fort Lauderdale, FL 33301

73 Isle of Venice Drive Fort Lauderdale, FL 33301

ARTICEL III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Carrie G. Nell

73 Isle of Venice Drive

Fort Lauderdale, FL 33301

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..

Carrie G. Nell registered agent

ARTICLE IV – Manager or Managing Members

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Manager

Carrie G. Nell

73 Isle of Venice Drive Fort Lauderdale, FL 33301

Manager

Marcia L. Nell

340 Nell Road

East Berlin, PA 17316

ARTICLE V: Effective date, if other than the date of filing is NOT APPLICABLE.

Required Signature:

Signature of a member Carrie G. Nell

(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.)

Carrie G. Nell

typed or printed name of signee