



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 608588 7625702

AUTHORIZATION :

Stephanie Milnes

COST LIMIT : \$ 125.00

ORDER DATE : April 12, 2013

ORDER TIME : 10:11 AM

ORDER NO. : 608588-005

CUSTOMER NO: 7625702

DOMESTIC FILING

NAME: MISSION CAPITAL PERSONNEL
SERVICES, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes - EXT. 52920

EXAMINER'S INITIALS: _____

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mission Capital Personnel Services, LLC
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:

Chris Sicilian

Name of Person

Mission Capital Advisors, LLC

Firm/Company

32 Avenue of the Americas

Address

New York, New York 10013

City/State and Zip Code

csicilian@missioncap.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Sicilian

Name of Person

at (**212**) **925-6692**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mission Capital Personnel Services, 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:

11390 Jog Road
Suite 102
Palm Beach Gardens, Florida 33418

Mailing Address:

11390 Jog Road
Suite 102
Palm Beach Gardens, Florida 33418

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:

Joseph Runk
Name

112 Via Capri
Florida street address (P.O. Box **NOT** acceptable)
Palm Beach Gardens, FL 33418
City, State, and Zip

FILED
13 APR 12 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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/ Joseph Runk
Registered Agent's Signature (REQUIRED)

(CONTINUED)

