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Division of Corporations

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From:

Account Name : LEGALZOOM.COM INC.

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Fax Number

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Email Address:

FLORIDA LIMITED LIABILITY CO.

Alliance Investers LLC

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COVER LETTER

	Registration Section Division of Corporations			
SUBJEC:	Alliance Investors LLC			
300360		imited Liabilit	y Company	
The enclos	used Articles of Organization and fee(s) a	ire submitted	for filing.	
Please reti	arn all correspondence concerning this a	natter to the fo	ollowing:	
	Cheyenne Moseley, Legalzoom.com,	Inc.		
		Name of	Person	
	Legalzoom.com, Inc.			
		Firm/Cor	прапу	······································
	101 N. Brand Blvd., 10th Floor			
		Addre	ess	
	Glendale, CA 91203			
	onlinetilings@Legalzoom.com	City/State and	Zip Code	
	E-mail address: (to be use	d for future a	inual report notification)	
For further	information concerning this matter, plea	se call:		
	Cheyenne Moseley	323	962-8600 ext, 7625	
	Name of Person	Area Code	Daytime Telephone Nu	mber
Enclosed	is a check for the following amount:			
]\$125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certific	d Copy I copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy dditional copy is enclosed)
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Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CN

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLET	- Name:
----------	---------

The name of the Limited Liability Company is:

Alliance Investors LLC

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
1651 N Tate School Rd	
Cantonment, FL 32533	

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

(The Limited Liability Company carnot serve as its own Registered Agent. You must designate an individual or another business eatity with an active Florida registration.)

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

Name

1653 N Tate School Rd

Florida street address (P.O. Box NOT acceptable)

CantonmentFlorida32533CityStateZip

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 605, F.S..

Registered Agent's Signature (REQUIRED)

Chayerra Adua by , Goded Dieber Corporation Agents , Se

(CONTINUED)

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Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Loretta Bargaineer Fountain
	165! N Tate School Rd
	Cantonment, FL 32533
	
E V: Effective date, if other than the dective date is listed, the date must be of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
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