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Division of Corporations

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From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

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FLORIDA LIMITED LIABILITY CO.

Profit First Advisory, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Profit First Advisory, 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:	Mailing Address:
104 Middleton Place Ponte Vedra Beach, FL 32082	104 Middleton Place Ponte Vedra Beach, FL 32082

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:

Barlin Business Solutions	
Name	
104 Middleton Place Florida street address (P.O. Box	NOT acceptable)
Ponte Vedra Beach	_{FL} 32082
City	Zip

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.



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Page Lof 2

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Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR	John Tapinis & Associates Ltd
	200 Maple Avenue
	Red Bank, NJ 07701
AMBR	Barlin Business Solutions
	104 Middleton Place
	Ponte Vedra Beach, FL 32082
(Use attachment if necessary)	
(Use attachment if necessary)	
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ELE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) ELE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with sections)	Docusigned by: Which Barlin member or an authorized representative of a member. on 605.0203 (1) (b). Florida Statutes, the execution of this documen
ILE V: Effective date, if other than the diffective date is listed, the date must be e of filing.) ILE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation)	Docusigned by: Which Barlin member or an authorized representative of a member. on 605.0203 (1) (b). Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true.
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Page 2 of 2