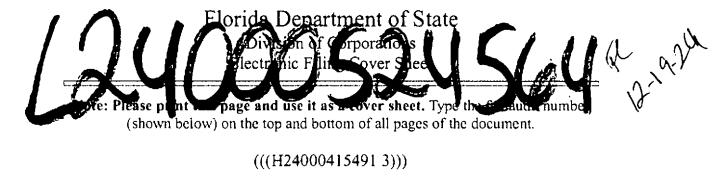
N

m

CE





H240004154913ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)813-1184

Fax Number : (516)935-3088

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: agarabedian@rossstrent.com

FLORIDA LIMITED LIABILITY CO.

Frogs Leap Consulting LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

18 PH 3: 02

Electronic Filing Menu

Corporate Filing Menu

Help



H24000415491

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limi	ted Liability Company is:					
	Frogs Lea	o Consulting	LLC			
	(Must end with the words			or "LLC.")		
ARTICLE II - Addr The mailing address a	ess: and street address of the pr	incipal office of the	e Limited Liability C	ompany is:		
Principal Office Add	lress:	Mailing Addre	<u>ss:</u>			
24 South Bounty		24 S	outh Bounty Lar	ne		
Key Largo, FL 33037		<u>Key l</u>	Key Largo, FL 33037			
another business enti	y Company cannot serve as ty with an active Florida re rida street address of the r	egistration.)	-	esignate an individ)24 DE1	-
	Wayne Weiss				2	, , , , , ,
		Name			0 18 PM 3: 02	्रे हैं राज्यान
	24 South Bounty L			SE FIL	ယ္	بدنند ر. اا
	Florida street address (P.O. Box <u>NOT</u> acc	ceptable)	PAT	02	
	Key Largo	FL	33037			
	City		Zip			
the place designate capacity. I further o	as registered agent and to a sed in this certificate, I here agree to comply with the pr am familiar with and acce	by accept the appo ovisions of all state	intment as registered ites relating to the pro If my position as regis	agent and agree to oper and complete p	act in th performa	iis ince
	Wayne (Waiaa t's Signature (REC		_		
		it's Signature (REC ayne Weiss	ioiked)			
		ONTINUED)				
		Page 1 of 2				

H24000415491

Title:	Name and Address:			
"AMBR" = Authorized Member "MGR" = Manager				
MGR - Manager MGR	Wayne Weiss			
	24 South Bounty Lane			
	Key Largo, FL 33037		_	
				
			_	
				
				
(Use attachment if necessary)		. ~	25	
•				
• • • • • • • • • • • • • • • • • • • •)24	
ICLE V: Effective date, if other than the date of filin	g:	. (OPTIONAL))24 DE3	6
ICLE V: Effective date, if other than the date of filing a effective date is listed, the date must be specific a	g:nd cannot be more than five busines	. (OPTIONAL) is days prior to c)]/ ₁ DEday	ys after
(Use attachment if necessary) ICLE V: Effective date, if other than the date of filing reffective date is listed, the date must be specific a ate of filing.)	g:nd cannot be more than five busines	. (OPTIONAL) is days prior to c)24 DE:day	ys after
ICLE V: Effective date, if other than the date of filing a effective date is listed, the date must be specific a ate of filing.) ICLE VI: Other provisions, if any.	g:nd cannot be more than five busines	. (OPTIONAL) is days prior to o	S	ys after
ICLE VI: Other provisions, if any.	g:nd cannot be more than five busines	. (OPTIONAL) is days prior to o)24 DE:day	ys after
ICLE VI: Other provisions, if any.		. (OPTIONAL) is days prior to o	S	ys after
ICLE VI: Other provisions, if any.		. (OPTIONAL) is days prior to o	S	ys after
ICLE VI: Other provisions, if any.		. (OPTIONAL) is days prior to o	S	ys after
ICLE VI: Other provisions, if any. REQUIRED SIGNATURE:		OPTIONAL) is days prior to o	S	ys after
ICLE VI: Other provisions, if any.		. (OPTIONAL) is days prior to o	S	ys after
REQUIRED SIGNATURE: Wayne Weiss Signature of a member of	or an authorized representative of a	member.	8 PM 3:02	ys after
REQUIRED SIGNATURE: Wayne Weiss Signature of a member of the section 605.02	or an authorized representative of a 03 (!) (b), Florida Statutes, the execut	member.	& P# 3:02	ys after
REQUIRED SIGNATURE: Wayne Weiss Signature of a member of the constitutes an affirmation under the	or an authorized representative of a 03 (!) (b), Florida Statutes, the execute e penalties of perjury that the facts sta	member. tion of this docur	© P# 3:02	ys after
REQUIRED SIGNATURE: Wayne Weiss Signature of a member of a membe	or an authorized representative of a 03 (1) (b), Florida Statutes, the execut e penalties of perjury that the facts sta ion submitted in a document to the De	member. tion of this docur	© P# 3:02	ys after
REQUIRED SIGNATURE: Wayne Weiss Signature of a member of the constitutes an affirmation under the	or an authorized representative of a 03 (1) (b), Florida Statutes, the execute penalties of perjury that the facts station submitted in a document to the Desprovided for in s.817.155, F.S.)	member. tion of this docur	© P# 3:02	ys after
REQUIRED SIGNATURE: Wayne Weiss Signature of a member of a membe	or an authorized representative of a 03 (1) (b), Florida Statutes, the execut e penalties of perjury that the facts sta ion submitted in a document to the De	member. tion of this docur	© P# 3:02	ys after

Page 2 of 2