ATTORNEYS AT LAW A PARTHERBUR OF PROFESSIONAL ASSOCIATIONS NATIONBUANK TOWER

OHE FINANCIAL PLAZA, SUITE 1800 IQO SOUTHEAST THIRD AVENUE FORT LAUDENDALE, FLORIDA 00004-1007 FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIOA

WILLIAM H. BEHSON, P.A. DUBBAND T. MOYLE, P.A. MIKWART P. CHAMBERS, P.A. MARK 5 MUCCI

RAHEN C EPSTON HOPE L PLEVY EVAN B PLOTEA LEE A WEINTHAUB

MARBRALL J. COUPER P.A. OF COURSE

February 16, 1995

BHOWARD (305) 834-6500 DADE (106) 944-331) PALM BEACH (407) 734 4655 COURTERN (GOC) JUMISOAN

#### YIA FEDERAL EXPRESS

Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32301 700001409687 -02/20/95--01013--003 

Rc:

Articles of Organization For Florida Limited Liability Company

NEW LAUDERDALE L.C.

Dear Secretary of State:

Please find enclosed the original and one copy of the Articles of Organization For Florida Limited Liability Company to be filed with your office along with our firm's check in the amount of \$285.00 representing the filing fee.

Truly yours,

BENSON, MOYLE & CHAMBERS (hours)

ark S. Mucei

the First constant of the standard of the standa Please return a stamped copy of the Articles of Organization to our office via the enclosed self-addressed, Federal Express envelope.

Thank you, for your cooperation in this regard,

For the Firm

B. REGISTER FEB 2 3 1595

MM. Jelicaremeni

Carlos Jer Koray Enclosures



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 23, 1995

MARK S MUCCI, ESQUIRE 100 SE THIRD AVENUE SUITE 1600 FT LAUDERDALE, FL 33394-1697

SUBJECT: NEW LAUDERDALE L.C.

Ref. Number: W95000004157

Rotush A. L. F. On be CONBOX, CKOD-UND CONBOX, CKOD-UND

We have received your document for NEW LAUDERDALE L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, or trust/trustee listed as a manager or managing member of a limited liability company must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

The corporate name must be identical throughout the document.

Please complete number 4 of the affidavit. It should be the total of number 2 and number 3.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6919.

Beth Register Corporate Specialist Supervisor

Letter Number: 895A00008293

Lollected

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED FILED LIABILITY COMPANY 95 HAR - 1 PH [2: 0].

SECRETARY OF STATE

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

**NEW LAUDERDALE L.C.** 

#### ARTICLE II - Address:

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

2455 East Sunrise Boulevard Suite 1102 Fort Lauderdale, FL 33304

#### **ARTICLE III - Duration:**

The terminated of the Limited Liability Company shall be on or before February 7, 2025 or as otherwise earlier required under the Joint Venture Agreement December 1994.

#### **ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(cs) of the managing member(s) are:

Psychic Readers Network, Inc. 2455 East Sunrise Boulevard Suite 1102 Fort Lauderdale, FL 33304

Calling Card Co., Inc. 560 Sylvan Avenue Englewood, NJ 07632

#### ARTICLE V - Admission of Additional Members

The right, if given, of the remaining members and the terms and conditions of the admissions shall be:

None.

### **ARTICLE VI - Membern Rights to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolutions of a member of the occurrence of any other event which terminates the continued members of a member in the limited liability company shall be:

None.

## FILED

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICES MAR -1 PH |2: 01,

SECRETARY OF STATE MULAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: NEW LAUDERDALE L.C.
- 2. The name and address of the registered agent and office is:

# THOMAS LINDSEY 2455 EAST SUNRISE BOULEVARD SUITE 1102 FORT LAUDERDALE.FL 33304

Having been named as a 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.

(Signature)

(Date)

Filing Fee: \$35.00 for Designation of Registered Agent

#### AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of NEW LAUDERDALE L.C. deposes and says:

- 1) the above named limited liability company has at least two members;
- 2) the total amount of cash contributed by the member(s) is \$25.000;
- if any, the agreed value of the property other than cash contributed by member(s) is \$00.00; and
- 4) the total amount of cash or property anticipated to be contributed by member(s) is \$25,000. This total includes amounts from 2 and 3 above.

Signature of a member of authorized representative of a member.

(In accordance with Section 604.408(3), Plorida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts state herein are true.)

Filing Fee: \$250 for Articles of Organization and Affidavit

FILE NOW: Fee after May 1, will be \$263.75

S 238.75   Make Check Payable To: FLORIDA DEPARTMENT OF STATE					_	SECRET	R-1 PH III 22
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	7. Name and Address of Curr	ent Registered Agent	<del></del>	Name 6	. Name and	Address of New R	
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