

L95000000625

August 3, 1995

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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***285.00 ***285.00


RE: York & Associates, L.C.

Dear Sir or Madam:

Enclosed for filing for the above-referenced Florida limited liability company are the following documents:

1. Articles of Organization;
2. Certificate of Designation of Registered Agent/Registered Office;
3. Affidavit of Membership and Contributions; and
4. A check in the amount of \$285 payable to the Department of State representing the filing fee for the Articles of Organization, Affidavit and for the Designation of Registered Agent.

If you have any questions or need additional information regarding this filing, please contact the undersigned.



Felecia G. York
3414 Skysail Place
Tampa, FL 33607

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8/16/95

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Enclosure

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Organization for Florida Limited Liability Company

York & Associates, L.C.

Article One

Name

The name of the limited liability company is York & Associates, L.C.

Article Two

Address of Principal Office

The mailing address of the principal office of the limited liability company is: P.O. Box 27254, Tampa, FL 33623.

The street address for the principal office of the limited liability company is: 3414 Skysail Place, Tampa, FL 33607.

Article Three

Registered Agent

The name and street address of the limited liability company's registered agent is:

Felecia G. York
3414 Skysail Place
Tampa, FL 33607

Article Four

Period of Duration

The period of duration of the limited liability company shall be from the date of filing these Articles of Organization with the Secretary of State until the occurrence of the earliest of the following events:

- a) the passage of thirty (30) years from the date of filing these Articles of Organization with the Secretary of State; or
- b) the dissolution of the limited liability company pursuant to the provisions of the Florida Limited Liability Company Act; or

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- c) the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or upon the occurrence of any other event that terminates the continued membership of a member in a limited liability company, unless the continuation of the limited liability company is consented to by the remaining members as provided for in Article Seven of these articles.

Article Five

Purpose and Powers

The purpose for which the limited liability company is organized is to engage in business consulting services and all other activities and conduct permitted by the laws of the State of Florida. The limited liability company shall have all powers and authority granted by the Florida Limited Liability Company Act.

Article Six

Additional Members

Additional members may be admitted during the existence of the limited liability company upon the agreement of members representing more than 50% of the ownership percentage interests of all the members of the limited liability company prior to the date of admission. The terms and conditions of such admission shall be specified by the members. Ownership percentage interest shall be determined by the capital contributions of the members to the limited liability company. A member's ownership percentage interest shall be the percentage represented by the member's capital contributions to the limited liability company and as adjusted from time to time to properly reflect any additional contributions or withdrawals by the members.

Article Seven

Continuity of Business

Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event that terminates the continued membership of a member in the limited liability company, the remaining members of the limited liability company shall have the right to continue the business of the limited liability company if members representing more than 50% of the ownership percentage interests of all the remaining members consent to such continuation. The ownership percentage interest shall be determined as set forth in Article Six of these articles.

Article Eight

Management

The management of the limited liability company shall be vested in the members of the limited liability company. The names and addresses of the members are as follows:

Felecia G. York
P.O. Box 27254
Tampa, FL 33623

Mary Comerford
17 Mansfield Place
Dollard-des-Ormeaux, QC H9G 2B3
Canada

Cyndi Grammel
671 Crescentville Rd.
Cincinnati, OH 45246

Sharon Stellingworth
P.O. Box 23
North Branford, CT 06471

Article Nine

Additional Capital Contributions

Additional contributions by members will be permitted only upon the vote of members representing more than 50% of the ownership percentage interest of the members in the limited liability company. Upon such vote, each member shall then be permitted to make additional contributions in amounts sufficient to retain such member's percentage interest. The failure on the part of any member to make an additional capital contribution may result in a decreased ownership percentage interest. Ownership percentage interest shall be determined as set forth in Article Six of these articles.

Article Ten

Transfer of Ownership Interest

A transferee of a limited liability company interest shall not be admitted as a member of the limited liability company unless approved by a vote of members representing more than 50%

of the ownership percentage interests.

Executed this 9 day of August, 1995.

Felecia G. York
Felecia G. York

Acknowledgment

State of Florida)
) ss:
County of Hillsborough)

The foregoing Articles of Organization was acknowledged before me this 8th day of August, 1995 by Felecia G. York.



Monica Terry
Notary Public
My commission expires: 11/20/98

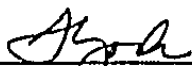
York & Associates, L.C.
Affidavit of Membership and Contributions

State of Florida)
) ss:
County of Hillsborough)

The undersigned member of York & Associates, L.C., deposes and says:

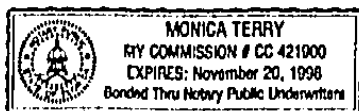
1. The above named limited liability company has at least two members.
2. The total amount of cash contributed by the members is \$500.00.
3. No property other than cash has been contributed by members.
4. The total amount of cash and property anticipated to be contributed by the members is \$500.00.

I hereby affirm, under penalty of perjury, that the foregoing is true and correct.



Felecia G. York

The foregoing Affidavit of Membership and Contributions was acknowledged before me this 2nd day of August, 1995 by Felecia G. York.





Notary Public
My commission expires: 11/20/98

York & Associates, L.C.

Certificate of Designation of Registered Agent/Registered Office

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned, a resident of the State of Florida, submits the following statement accepting designation as the registered agent for the following limited liability company in the State of Florida:

1. The name of the limited liability company is: York & Associates, L.C.
2. The name and address of the registered agent and office is:

Felecia G. York
3414 Skysail Place
Tampa, FL 33607

Having been named as registered agent and designated to accept service of process for the above named 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.



Felecia G. York


8-8-95

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1996		 FLORIDA DEPARTMENT OF STATE Randolph B. McNair Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 238.75		Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company YORK & ASSOCIATES, L.C. P.O. BOX-27254. TAMPA-FL-33623		DOCUMENT #L95000000625	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3a. Mailing Address YORK & ASSOC., L.C. Suite, Apt. #, etc. 3102 - W. HORATIO #17 City & State TAMPA FL. Zip 33609	
3. Date Organized or Qualified 08/14/1995		3a. State of Formation FL	
4. FET Number <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		5. Date of Last Report 6. Certificate of Status Desired <input type="checkbox"/> \$5.75 Additional Fee Required	
7. Name and Address of Current Registered Agent YORK, FELECIA G 3414-SKYSAIL-PLACE TAMPA-FL-33607--		8. Name and Address of New Registered Agent Name FELECIA G. YORK Street Address (P.O. Box Number is Not Acceptable) 3102 - W. HORATIO Suite, Apt. #, etc. #17 City TAMPA	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations		DATE _____	
SIGNATURE _____			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	YORK, FELECIA G	P.O. BOX 27254	TAMPA FL
MEM	COMERFORD, MARY	17 MANSFIELD PL. DOLLARD-D	OC H9G 2B3 CANADA
MEM	GRAMMEL, CYNDI	671 CRESCENTVILLE RD.	CINCINNATI OH
MEM	STELLINGWORTH, SHARON	P.O. BOX 23 P.O. BOX 270368	NORTH-BRANFORD CT WEST HARTFORD, CT. 06127
11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address			
SIGNATURE: _____			