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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 410-1015

From: Account Name : EMPIRE CORPORATE KIT COMPANY
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LIMITED LIABILITY COMPANY

FORENSIC ACCOUNTING INFORMATION & EDUCATION SENTER,

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 06 |
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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 29, 1998

RICHARD A. JOSEPHER
100 W. CYPRESS CREEK ROAD, SUITE 900
FORT LAUDERDALE, FL 33309

SUBJECT: FORENSIC ACCOUNTING INFORMATION & EDUCATION CENTER, LLC
REF: W98000024541

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The affidavit must set forth the amount of the cash and a description and the agreed value of property other than cash contributed by the members, and the amount anticipated to be contributed by the members.

A description of the property must be included.,

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

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**ARTICLES OF ORGANIZATION
OF
FORENSIC ACCOUNTING INFORMATION & EDUCATION CENTER, LLC**

ARTICLE I

The name of the Limited Liability Company is:

**FORENSIC ACCOUNTING INFORMATION & EDUCATION CENTER, LLC
3000 Holiday Drive, Suite 1503
Fort Lauderdale, FL 33316**

ARTICLE II

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

**3000 Holiday Drive, Suite 1503
Fort Lauderdale, FL 33316**

ARTICLE III

The existence of the Limited Liability Company shall commence upon the filing of these Articles of Organization by the Department of State and shall be perpetual.

Prepared By:
Richard A. Josepher, Esquire
Gutter, Josepher & Ruffin
100 W. Cypress Creek Road - Suite 900
Ft. Lauderdale, FL 33309
FL Bar #251852

(954) 938.4555

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ARTICLE IV

☐ The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager is:

Herbert Rosenthal
c/o 3000 Holiday Drive, Suite 1503
Fort Lauderdale, FL 33316

☐ The Limited Liability Company is to be managed by the member and the name and address of the managing member is:

Herbert Rosenthal
c/o 3000 Holiday Drive, Suite 1503
Fort Lauderdale, FL 33316

ARTICLE V

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: upon agreement of all members.

ARTICLE VI

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 dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: upon agreement of all members and/or their successors.

ARTICLE VII

The undersigned member or authorized representative of a member of FORENSIC ACCOUNTING INFORMATION & EDUCATION CENTER, LLC certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member is: \$ 100.00;

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- 3) if any, the agreed value of property other than cash contributed by members is \$900 consisting of capitalized costs and intangible assets, and
- 4) the total amount of cash and property contributed and anticipated to be contributed by members is \$1,000.00

H. Rosenthal

Signature of a member or an authorized representative of a member.

(In accordance with section 608.403(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

H. Rosenthal

Herbert Rosenthal

Executed at Fort Lauderdale, Florida on the 27 day of October, 1998.

By:

H. Rosenthal
HERBERT ROSENTHAL

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STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 27th day of October, 1998, by HERBERT ROSENTHAL, the _____ of FORENSIC ACCOUNTING INFORMATION & EDUCATION CENTER, LLC, a Florida limited liability company, to me personally known or who produced _____ as identification, who did take an oath and executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal in the County and State named above, this 27th day of October, 1998.

Lauren Cohen Reilly

NOTARY PUBLIC

Name of Notary: _____
Commission No.: _____

My Commission Expires:



Lauren Cohen Reilly
MY COMMISSION # CC766619 EXPIRES
September 9, 2002
BONDED THROUGH TFCY FARM INSURANCE, INC.

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CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited company is FORENSIC ACCOUNTING INFORMATION & EDUCATION CENTER, LLC.
2. The name and the Florida street address of the registered agent are:

FORENSIC ACCOUNTING INFORMATION & EDUCATION CENTER, LLC

3000 Holiday Drive, Suite 1503
Fort Lauderdale, FL 33316

Herbert Rosenthal

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.

Dated this 27 day of October, 1998.

By: *H. Rosenthal*
HERBERT ROSENTHAL
Registered Agent

agrfor.llc
10/22/98

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