

99000000744

Stacy McMillen

National Financial Companies

Requester's Name

700 S. Federal Hwy, Ste 200

Address

Boca Raton, FL 33432

City/State/Zip

Phone #

300002751453--5

-01/22/99--01071--005

***285.00 ***285.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

Article II & in excess of

1. 00789-00524-02746-00671

(Corporation Name)

(Document #)

2/5

2. 1199-2162

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☐ Walk in

☐ Pick up time

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

Name
Availability
Document Examiner
Updater
Updater
Verifier
Acknowledgement
P. Verifier

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

99 FEB -5 PM 3:12
SECRETARY OF STATE
DIVISION OF REGISTRATIONS

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 28, 1999

STACY MCMILLEN
NATIONAL FINANCIAL COMPANIES
700 S. FEDERAL HWY, STE 200
BOCA RATON, FL 33432

SUBJECT: BNI SOFTWARE L.L.C.
Ref. Number: W99000002162

We have received your document for BNI SOFTWARE L.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):

In Article II, please state whether this is the mailing or principal address, or both, also, the Affidavit cannot state that the contributions will be "in excess of", it must state a specific amount, or that the contributions are "not to exceed" the amount given.,

Section 608.407(1)(e), Florida Statutes, requires the articles of organization to set forth the right, if given, of the members to admit additional members and the terms and conditions of the admissions. Reference to the operating agreement/regulations is not sufficient.

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 (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 899A00003804

**ARTICLES OF ORGANIZATION
OF
BNI SOFTWARE LLC**

The undersigned, desiring to form a limited liability company pursuant to Chapter 608 of the Florida Statutes, does hereby certify as follows:

ARTICLE ONE

The name of the Limited Liability Company is **BNI SOFTWARE LLC**.

ARTICLE TWO

The principal and mailing address of the Limited Liability Company is 700 South Federal Highway, Suite 200, Boca Raton, Florida 33432.

ARTICLE THREE

The period of duration of the Limited Liability Company is January 21, 2029.

ARTICLE FOUR

The name and mailing address of the individual who will serve as managing member of the Limited Liability Company is as follows:

NAME

ADDRESS

Gary L. Shapiro

700 South Federal Highway, Suite 200,
Boca Raton, Florida 33432

ARTICLE FIVE

Admission of additional or substitute members of the Limited Liability Company is permitted upon the consent of the majority of the Members and such additional or substitute member agrees, in writing, to be bound by the terms and provisions of the Operating Agreement.

RECEIVED
DIVISION OF CORPORATIONS
99 FEB -5 PM 3:12

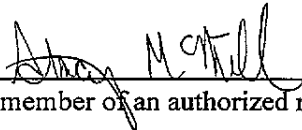
ARTICLE SIX

Upon 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, the majority remaining Members of the Limited Liability Company, within 180 days after such event, may vote to continue to carry on the Limited Liability Company's business.

ARTICLE SEVEN

The undersigned member or authorized representative of a member of BNI Software LLC certifies as follows:

- A. the above named limited liability company has at least one member;
- B. the total amount of cash contributed by the member(s) is \$1,000.00;
- C. if any, the agreed value of property other than cash contributed by the member(s) is \$0.00; and
- D. the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$1,000.00.



Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Stacy McMillen

Typed or printed name of signee

**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 liability company is: BN1 Software LLC

2. The name and the Florida street address of the registered agent are:

Stacy McMillen
NAME

700 S. Federal Hwy Suite 200
Florida street address (P. O. Box NOT ACCEPTABLE)

Boon Canton FL 33432
CITY, STATE AND 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.

Stacy McMillen
SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent