

L 99000003831  
STEVEN H. SILTON  
ATTORNEY AND COUNSELOR AT LAW

June 22, 1999

Florida Secretary of State  
Attn.: Corporations  
409 E. Gaines St.  
Tallahassee FL 32399

re: USInjurylawyer.com, LLC

Dear Sir or Madame, L99-3831

Enclosed please find a certificate of Designation of Registered Agent/Office, Articles of Organization for Florida LLC and filing fee in the above referenced matter.

Please contact my office with any questions.

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-06/25/99--01068--013  
\*\*\*\*285.00 \*\*\*\*285.00

Very Truly Yours,

Steven H. Sifton

46/29  
FILED  
99 JUN 25 PM 12:42  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SHS\jrp  
Enclosures

4pgs

OF COUNSEL TO THE LAW FIRM OF KAMPF & ASSOCIATES, P.A.

901 FOSHAY TOWER • MINNEAPOLIS MINNESOTA • 55402  
PHONE: (612) 359-6142 • FAX: (612) 359-8784

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: USInjurylawyer.com, LLC

**ARTICLE II - Address:**

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

109 Bobolink Way  
Naples FL 34105

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

Ten years

**ARTICLE IV - Management:**

(Check the appropriate box and complete the statement)

- ☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Geoffrey J. Gempeler  
109 Bobolink Way  
Naples FL 34105

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

**ARTICLE V - Admission of Additional Members:**

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

unanimous vote of all members

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99 JUN 25 PM 12:43  
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**ARTICLE VI - Members 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 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: unanimous vote of all non-affected members

**ARTICLE VII - Affidavit of Membership and Contributions**

The undersigned member or authorized representative of a member of USInjurylawyer.com, LLC  
\_\_\_\_\_ certifies:

- 1) the above named limited liability company has at least one member; \$ 1,000.00;  
2) the total amount of cash contributed by the member(s) is  
3) if any, the agreed value of property other than cash contributed by member(s) is \$ \_\_\_\_\_;  
(A description of the property is attached and made a part hereto.); and  
4) the total amount of cash and property contributed and anticipated to be \$ 25,000.00  
contributed by member(s) is

  
\_\_\_\_\_  
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.)

Geoffrey J. Gempeler

\_\_\_\_\_  
Typed or printed name of signee

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99 JUN 25 PM 12:43  
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TALLAHASSEE FLORIDA

**Filing Fee: \$250.00 for Articles and Affidavit**

**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: USInjurylawyer.com, LLC

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

Geoffrey J. Gempeler

NAME

109 Bobolink Way

Florida street address (P. O. Box NOT ACCEPTABLE)

Naples

34105

FL

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.*

  
SIGNATURE

**Filing Fee: \$ 35 for Designation of Registered Agent**

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