

L99000005917

SANFORD & ASSOCIATES  
2104 PARK STREET  
JACKSONVILLE, FL 32204

200002988672--6  
-09/16/99--01028--008  
\*\*\*\*285.00 \*\*\*\*285.00

City/State/Zip

Phone #

Office Use Only

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

1. THE POP GROUP, L.L.C.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- |                                    |                                             |                                                |
|------------------------------------|---------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Walk in   | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out  | <input type="checkbox"/> Will wait          | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy |                                             |                                                |

**NEW FILINGS**

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

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

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

**REGISTRATION/QUALIFICATION**

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

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FILED  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE  
WR 9/21

Examiner's Initials

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I NAME

The name of the Limited Liability Company is:

THE POP GROUP, L.L.C.

## ARTICLE II ADDRESS

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

234 N. WESTMONTE DR #200 ALTAMONTE SPRINGS, FL 32714  
407-869-9300

## ARTICLE III DURATION

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

THE LONGEST PERIOD OF TIME ALLOWED BY FLORIDA

## ARTICLE IV MANAGEMENT

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:

MAC TRAUJNECK 2216 SMOKE TREE CT. LONGWOOD FL 32779

A Nevada Corporation.

P.D.P. CONSULTING GROUP, INC.

3115 J ST JACKSONVILLE DISTRICT FL 32250

☒ 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:

MAC TRAUJNECK

## 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:

SUBJECT TO THE 100% APPROVAL OF THE MEMBERS

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TALLAHASSEE FLORIDA

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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 event which terminates the continued membership of member in the Limited Liability Company shall be:

SUBJECT TO THE 100% APPROVAL OF THE MEMBERS

**ARTICLE VII AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS**

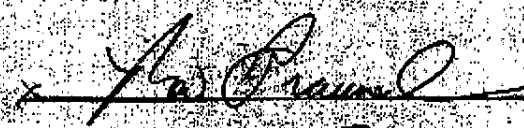
The undersigned member or authorized representative of a member of \_\_\_\_\_

THE FDP GROUP, L.L.C. certifies:

- 1) the above-named Limited Liability Company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 1,000
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 1,000  
(A description of the property is attached and made a part hereof.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 2,000

  
Signature of a member or authorized representative of a member.

(On 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.)

  
MHC TRAVISNECK

Filing Fee: \$250.00 for Articles and Affidavit

EFFECTIVE DATE OF L.L.C. - SEPT 7, 1999

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERD OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMIT 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 THE POP GROUP, L.L.C.

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

ROBERT C. SANFORD  
Name

2104 PARK STREET  
Florida street address (PO Box not acceptable)

JACKSONVILLE FL 32204  
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.

Robert C. Sanford  
Signature

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

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TALLAHASSEE FLORIDA