

#5969



## CERTIFICATE

**THIS IS TO CERTIFY** that all applicable provisions of the District of Columbia Limited Liability Company Act have been complied with and accordingly, this **CERTIFICATE OF ORGANIZATION** is hereby issued to:

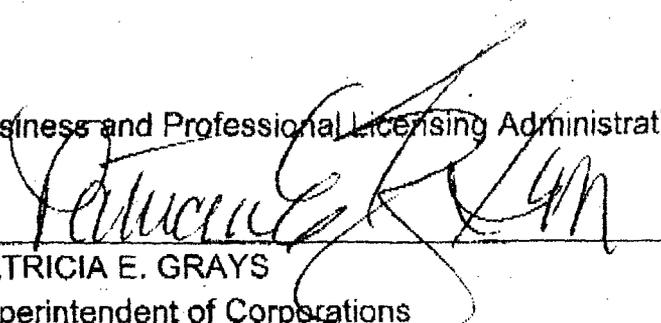
**CAPITOL LAW & POLICY GROUP, PLLC**

**IN WITNESS WHEREOF I** have hereunto set my hand and caused the seal of this office to be affixed as of the **13th** day of **April**, 2009.

LINDA K. ARGO  
Director

NSD/CES/REGISTRATION UNIT  
2011 OCT -7 PM 3:09

Business and Professional Licensing Administration

  
\_\_\_\_\_  
PATRICIA E. GRAYS  
Superintendent of Corporations  
Corporations Division

Adrian M. Fenty  
Mayor



**District of Columbia Government**  
**Corporations Division**  
 PO Box 92300  
 Washington DC 20090

**Articles of Organization of Domestic Limited Liability Company**

**Under Title 29, Chapter 10 of the District of Columbia Official Code (the DC Limited Liability Company Act of 1994), the organizer named below adopts these following Articles of Organization:**

1. Name the limited liability company. The name must include: LLC or Limited Liability Company, or -- if any professional services such those performed by certified public accountants, attorneys, architects, practitioners of the healing arts, dentists, optometrists, podiatrists, or professional engineers are part of your business -- the name must end with Professional Limited Liability Company or PLLC.

Capitol Law & Policy Group, PLLC

**PLLCs: your signature(s) on this form indicate that all PLLC organizers, members and managers are licensed to provide the professional services for which you are organized.**

2. Effective date is the date articles are accepted for filing.  
 3. Your signature on this form indicates that the articles exist in perpetuity.

4. Describe the company's purpose. If insurance is part of the purpose, prior registration with the Department of Insurance, Securities and Licensing (DISB) is required. If banking is part of the purpose, attach the DISB consent form.

The company's purpose is to provide legal services and consulting services to organizations and individuals.

5. Give the name and registered office address (not a PO Box) of the Registered Agent (RA) in the District. The RA must be either an individual person who resides in the District (a business office does not qualify), or a corporation with the authority in its own articles to act as a RA in the District. (Attach page 2, the RA-1 Form.)

Victor O. Frazer, Esq. -- 601 Pennsylvania Ave NW, Suite 407 North  
 Washington, DC 20004

*[Handwritten signature]*

6. Principal place of business.  
 601 Pennsylvania Ave NW, Suite 407 North  
 Washington, DC 20004

*[Handwritten initials]*

7. **General Partnership / Limited Partnership Conversions only:** This limited liability company formerly was the general partnership/ liability partnership known as \_\_\_\_\_ which was converted to a limited liability company.  
not applicable

**If you sign this form, you agree that you understand that anyone who makes a false statement anywhere on it can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22-2406.**

All Organizers <small>(add more sheets, as needed)</small>	Physical Street Address	Date	Signature
Victor O. Frazer, Esq.	601 Pennsylvania Ave NW #407 N Washington, DC 20004	4-9-09	<i>[Signature: Victor O. Frazer]</i>
Adonis E. Hoffman, Esq.	1203 19th Street NW, 4th Fl. Washington, DC 20036	4-9-09	<i>[Signature: Adonis E. Hoffman]</i>
Charles R. Jones, Jr., Esq.	1629 K Street NW, Ste 300 Washington, DC 20006	4-9-09	<i>[Signature: Charles R. Jones, Jr.]</i>

**Mail all forms and required payment to:**  
 Department of Consumer and Regulatory Affairs  
 Corporations Division  
 PO Box 92300  
 Washington, DC 20090  
 Phone: (202) 442-4400

**For overnight delivery send to:**  
 Corporate Bank of America  
 Attention: DC Government  
 Wholesale Lockbox #92300  
 Mail Code MD4-301-18-04  
 225 North Calvert Street - 18th floor  
 Baltimore, Maryland 21202

Please check [dcra.dc.gov](http://dcra.dc.gov) to view organizations required to register, to search business names, to get step-by-step guidelines to register an organization, to search registered organizations, and to download forms and documents. Just click on "Corporate Registrations."

**DCRA**

DEPARTMENT OF CONSUMER &amp; REGULATORY AFFAIRS

**District of Columbia Government****Corporations Division**

PO Box 92300

Washington DC 20090

**RA-1. Registered Agent Written Consent**

Use this form to appoint a Registered Agent for an entity. Choose Option A or B, but not both. There is no filing fee for this form.

Under DC Official Code (DCOC) Titles 29 and 41, a Registered Agent (RA) must be:

A bona fide resident of the District of Columbia (District), or

A for-profit corporation, authorized by articles of incorporation or certificate of authority to act as agent.

Limited Liability Corporations (LLCs) and Limited Liability Partnerships (LLPs) may not act as RAs. Entities may not act as their own RAs.

**A. By a District of Columbia resident:** I, a bona fide District resident, consent to act as a RA for the entity below.

Name of Resident

Victor O. Frazer, Esq.

Address of Resident (address must be in DC; not a PO Box)

601 Pennsylvania Avenue NW, Suite 407 North  
Washington, DC 20004

Entity Name

Capitol Law &amp; Policy Group PLLC

Signature

*Victor O. Frazer***B. By a legally authorized corporation:** The authorized corporate Registered Agent in the District, by the signatures of its President/Vice-President and Secretary/Assistant Secretary, agrees to act as RA for the entity below.

Name of RA Corporation

Address of Corporation (address must be in DC; not a PO Box)

Entity Name

President  Vice-President 

Signature

Secretary  Assistant Secretary 

Signature

**If you sign this form, you agree that you understand that anyone who makes a false statement anywhere on it can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22-2405.****Mail all forms and required payment to:**Department of Consumer and Regulatory Affairs  
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 Capitol Law & Policy Group, PLLC  
  
**PLLCs: your signature(s) on this form indicate that all PLLC organizers, members and managers are licensed to provide the professional services for which you are organized.**
- 2. Effective date is the date articles are accepted for filing.
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*Victor O. Frazer*  
*Adonis E. Hoffman*

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GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



**C E R T I F I C A T E**

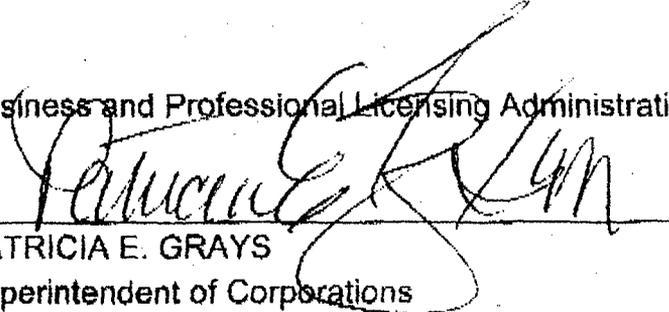
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**A. By a District of Columbia resident:** I, a bona fide District resident, consent to act as a RA for the entity below.

Name of Resident Victor O. Frazer, Esq.	Address of Resident (address must be in DC: not a PO Box) 601 Pennsylvania Avenue NW, Suite 407 North Washington, DC 20004
--	--

Entity Name Capitol Law & Policy Group PLLC	Signature <i>Victor O. Frazer</i>
--	--------------------------------------

**B. By a legally authorized corporation:** The authorized corporate Registered Agent in the District, by the signatures of its President/Vice-President and Secretary/Assistant Secretary, agrees to act as RA for the entity below.

Name of RA Corporation	Address of Corporation (address must be in DC: not a PO Box)
------------------------	--

Entity Name	
-------------	--

President <input type="checkbox"/> Vice-President <input type="checkbox"/>	Signature
--	-----------

Secretary <input type="checkbox"/> Assistant Secretary <input type="checkbox"/>	Signature
---	-----------

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