

Division of Corporations

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Florida Department of State  
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To: Division of Corporations  
 Fax Number : (850)205-0383

From: Account Name : A 1 A CORPORATE SERVICES, INC.  
 Account Number : I20010000247  
 Phone : (800)494-3124  
 Fax Number : (305)675-2811

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**Dynamic Solutions World-Wide LLC**

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

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:  
Dynamic Solutions World-Wide LLC

**ARTICLE II ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:  
2168 Stonecross Circle  
Orlando Florida 32828

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:  
Debbie A. Stelmacki  
2168 Stonecross Circle  
Orlando Florida 32828

Having been named as registered agent 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 as provided for in Chapter 608, F.S..

  
Debbie A. Stelmacki Registered Agent's Signature

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**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member-Managed Company.

**ARTICLE V MEMBERS (optional)**

MANAGING MEMBER

Debbie A. Stelmacki  
2168 Stonecross Circle  
Orlando Florida 32828

  
Debbie A. Stelmacki Registered Agent's Signature

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Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

NAME OF SIGNER Debbie A. Stelmacki

Typed or printed name of signee

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