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To: Division of Corporations  
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From: Account Name : CSH SERVICES, LLC  
Account Number : I2007C000160  
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**FLORIDA LIMITED LIABILITY CO.**

**I AM LOGISTICS LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$125.00

**C. LEWIS**  
JUL 15 2011  
**EXAMINER**

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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:

I AM LOGISTICS LLC

**ARTICLE II ADDRESS**

The principal office of the Limited Liability Company is:

4640 MARSH HARBOR DR  
TAVARES, FLORIDA 32778

The mailing address of the Limited Liability Company is:

PO BOX 118  
TAVARES, FLORIDA 32778

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

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

VINCENT WILLIAMS  
4640 MARSH HARBOR DR  
TAVARES, FLORIDA 32778

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.

x Vincent Williams  
VINCENT WILLIAMS / 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  
VINCENT WILLIAMS  
PO BOX 118  
TAVARES, FLORIDA 32778

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.....

X Vincent Williams  
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.

VINCENT WILLIAMS

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