

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

· From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

(305)634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

VOCALSCRIBE INFORMATION SYSTEMS, LLC.

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 02 |
| Estimated Charge | \$155.00 |
| | |

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ARTICLES OF ORGANIZATION FOR VOCALSCRIBE INFORMATION SYSTEMS, LLC.

ARTICLE I - Name

The name of the Limited Liability Company is VocalScribe Information Systems, LLC.

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is 334 Lake Crest Ct., Weston, FL 33326.

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Joel E. Greenberg, Esq. Fountains of Plantation Business Park 1242 N. University Drive Plantation, FL 33322

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 agice 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.

DEL E. GREENBERG, Registered Agent

ARTICLE IV - Management

The Limited Liability Company is to be a Member-Managed Company

LAWRENCE EINBINDER, 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.)

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