# Husch & Eppenberger, LLC Attorneys and Counselors at Law Attorneys and Counselors at Law Attorneys and Counselors at Law Attorneys and Counselors at Law

November 9, 2001

50004688375--2 -11/20/01--01005--016 \*\*\*\*125.00 \*\*\*\*125.00

816.421.0596 fax www.husch.com

Katherine Harris, Secretary of State Florida Department of State PL-02, The Capitol Tallahassee, FL 32399-0250

Re: Michael R. Wallace Consulting, L.L.C.

Dear Sir or Madam:

Laul-20310

Enclosed for filing please find one original and one copy of the Articles of Organization of Michael R. Wallace Consulting, L.L.C. Also enclosed is a check for \$125.00 for the filing fees.

Please file the original and return a file-stamped copy to me in the enclosed self-addressed, stamped envelope. If you should have any questions, please call.

Sincerely yours,

Tammy Strutton
Legal Assistant

TJS Enclosures

cc: Lisa A. Veselich

VISION OF CORPORATIONS

ST. LOUIS

::ODMA\PCDOCS\KANSAS\_CITY\485757\1

CLAYTON

KANSAS CITY

JEFFERSON CITY

WICHITA

PEORIA

# FLORIDA ARTICLES OF ORGANIZATION OF MICHAEL R. WALLACE CONSULTING, L.L.C.

The undersigned member of the limited liability company (the "Members"), hereby forms and establishes a limited liability company under the laws of the State of Florida.

# ARTICLE I

The name of the limited liability company is Michael R. Wallace Consulting, LLC (the "Company").

### **ARTICLE II**

The mailing address and street address of the principal office of the Company is 8665 Bay Colony Drive, Naples, Florida 34108.

## **ARTICLE III**

The name and the Florida Street address of the Registered Agent is Michael R. Wafface 8665 Bay Colony Drive, Naples, Florida 34108.

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 related 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.

Registered Agent's Signature

Print or Type Name: Michael R. Wallace

	IN WITNESS	WHEREOF,	the	undersig	ned has	subsc	ribe	ed his	name	on this	5th	_ day
of_	November	, 2001.						-	11			
				ME	MBER	:						
						,		$\wedge$				

MICHAEL R. WALLACE, Trustee of the Michael R. Wallace Revocable Trust dated June 6, 2001

DIANN L. WALLACE, Trustee of the Michael R. Wallace Revocable Trust dated June 6, 2001

DIVISION OF CONFORMATION