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Florida Department of State  
Division of Corporations  
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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**  
**ATLANTIC II CONSULTING, L.L.C.**

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION  
FOR  
ATLANTIC II CONSULTING, L.L.C.  
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

ATLANTIC II CONSULTING, L.L.C.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:


4300 North University Drive, Suite B-104  
Lauderhill, FL 33351

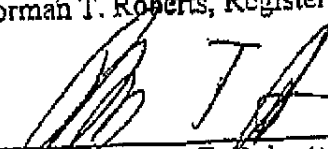
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Norman T. Roberts  
50 West Mashta Drive, Suite 2  
Key Biscayne, Florida 33149

*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 relating to the property 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..*

  
Norman T. Roberts, Registered Agent

  
Norman T. Roberts  
Authorized Representative of a Member

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