CSC

L0200000 2518

ORDER DATE : January 11, 2002

ORDER TIME : 11:46 AM

ORDER NO. : 680092-001

CUSTOMER NO: 7300948

2000048537 22--7

CUSTOMER: Mr. John F. Desimone
Mr. John F. Desimone

1507 Contreras Lane

The Villages, FL 32159

RECEIVED
02 FEB -1 PM 12: 50

DOMESTIC FILING

NAME: AUTOMATED SOLUTIONS LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX_____ ARTICLES OF ORGANIZATION

APPROVED AND FILED
02 FEB -1 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156
                EXAMINER'S INITIALS:

2-1-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

AUTOMATED SOLUTIONS LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

1507 CONTRERAS LANE, THE VILLAGES, FL 32159

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

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

Corporation Service Company
<div align="center">Name</div>

1201 Hays Street
Florida street address (P.O. Box **NOT** acceptable)

Tallahassee   FL   32301
<div align="center">City, State, and Zip</div>

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 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.

Corporation Service Company
By: *Deborah D. Skipper*   **Deborah D. Skipper**
<div align="center">Registered Agent's Signature</div>   ~~Asst. V. Pres.~~

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Deborah D. Skipper
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.)

DEBORAH D. SKIPPER
<div align="center">Typed or printed name of signee</div>

Filing Fees:
$100.00 Filing Fee for Articles of Organization
$ 25.00 Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)

AUTOMATED SOLUTIONS LLC

MEMBERS LIST

BUNPHERM UDOMPUI DESIMONE
1507 CONTRERAS LANE
THE VILLAGES, FL 32159

JOHN F. DESIMONE
1507 CONTRERAS LANE
THE VILLAGES, FL 32159

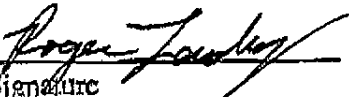sxk

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of   AUTOMATED SOLUTIONS LLC
(the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

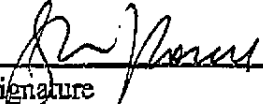This Limited Power of Attorney is executed on this l day of Febuary   2002

_____
Signature

John F Desimone
Print Name of Signer

WITNESS: WITNESS:

_____   _____
Signature   Signature

Roger Landry   Shervin Podd
Print Name of Witness   Print Name of Witness