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Florida Department of State
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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : BUSINESS FILLINGS
Account Number : 105256001620
Phone : (608)827-5300
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02 JUN 13 PM 12:49
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

A-1 Processing LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
A-1 Processing LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **A-1 Processing LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 2304 Coral Point Dr., Cape Coral, Florida 33990.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1000 West Avenue, Suite 1114, Miami Beach, Florida 33139. Located in the County of Miami-Dade.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2042.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Betsy Rothe, 2304 Coral Point Dr., Cape Coral, Florida 33990



Richard Oster, Vice President
Business Filings Incorporated
Authorized Representative

02 JUN 13 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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Prepared by Richard Oster, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

FAX AUDIT #

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

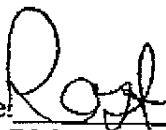
PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **A-I Processing LLC**

The name and address of the registered agent and office is **Business Filings Incorporated,**
1000 West Avenue, Suite 1114, Miami Beach, Florida 33139. Located in the County of
Miami-Dade.

Having been named as registered agent and to accept service of process for the above
stated corporation 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.

Signature: _____



Richard Oster, Vice President
Business Filings Incorporated

Date: June 13, 2002

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