Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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VISION OF CORPORATION

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : ZIMMERMAN, SHUFFIELD,

Account Number : I19990000006

: (407)425-7010

Fax Number : (407)425-2747

LIMITED LIABILITY COMPANY

Cornerstone Risk Strategy, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION

CORNERSTONE RISK STRATEGY, LLC A Florida Limited Liability Company

ARTICLE I NAME



The name of this limited liability company is Cornerstone Risk Strategy, LLC, referred to in these Articles of Organization as the "Company."

ARTICLE Π MAILING AND STREET ADDRESS

The mailing and street address of the principal office of the Company is as follows:

10 North Summerlin Avenue, #37 Orlando, Florida 32801

ARTICLE III COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 608.409(1), Florida Statutes, the Company's existence shall be deemed to have commenced at 12:01 a.m. on the date on which these Articles of Organization are filed by the Florida Department of State.

ARTICLE IV REGISTERED AGENT

The address of the initial Registered Office and the Registered Agent at such address are as follows:

William R. Lowman, Jr., Esq. 315 E. Robinson Street, Suite 600 Orlando, FL 32801

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ARTICLE V MANAGEMENT

The Company is to be manager managed.

ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 608, Florida Statutes, and shall be governed to by the laws of the State of Florida.

Scott G. Turner Member

ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 proyided for in Chapter 608 of the Florida Statutes.

William R. Lowman, Jr., Esq.