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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CSI Classroom Staffing Solutions, LLC.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas H. Edwards
(Name of Person)

Consulting Solutions International, Inc.
(Firm/Company)

3512 Maclay Boulevard South, Suite 102
(Address)

Tallahassee, FL 32312
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Thomas H. Edwards at (850) 205-2111
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
OF
CSI CLASSROOM STAFFING SOLUTIONS, LLC.**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE I.
NAME**

The name of the Limited Liability Company is **CSI CLASSROOM STAFFING SOLUTIONS, LLC.**

**ARTICLE II.
ADDRESS**

The address of the place of business and the mailing address in Florida are:

Place of business: 3512 Maclay Boulevard South, Suite 102
Tallahassee, FL 32312

Mailing address: 3512 Maclay Boulevard South, Suite 102
Tallahassee, FL 32312

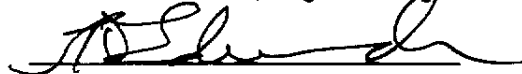
**ARTICLE III.
REGISTERED AGENT AND REGISTERED OFFICE**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

Thomas H. Edwards
3512 Maclay Boulevard South, Suite 102
Tallahassee, FL 32312

Having been named as registered agent and as the person to accept service of process for the above-named 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, I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Thomas H. Edwards, Registered Agent



CSI CLASSROOM STAFFING SOLUTIONS, LLC.

Articles of Organization

Page 1 of 2

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JAN 22 PM 3:25
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STATE


**ARTICLE IV.
MANAGEMENT**

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

Thomas H. Edwards, Manager
3512 Maclay Boulevard South
Tallahassee, FL 32312

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 20th day of January, 2004.

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.


Thomas H. Edwards

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