

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L04000021929  
FILED 8:00 AM  
March 22, 2004  
Sec. Of State  
JBRYAN

**Article I**

The name of the Limited Liability Company is:  
HIGHLINE SOLUTIONS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
PO BOX 381  
PORT SALERNO, FL. 34992

The mailing address of the Limited Liability Company is:  
PO BOX 381  
PORT SALERNO, FL. 34992

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
P M CIOFFI JR  
949 SW 31ST ST.  
PALM CITY, FL. 34990

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.

Registered Agent Signature: P.M. CIOFFI JR

## **Article V**

The name and address of managing members/managers are:

Title: MGR  
P M CIOFFI JR  
949 SW 31ST ST.  
PALM CITY, FL. 34990

Title: MGRM  
ELISA J CIOFFI  
949 SW 31ST ST.  
PALM CITY, FL. 34990

Signature of member or an authorized representative of a member

Signature: P.M. CIOFFI JR

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