Electronic Articles of Organization
For
Florida Limited Liability Company

L04000058229
FILED 8:00 AM
August 05, 2004
Sec. Of State
lrivers

Article I

The name of the Limited Liability Company is:

COMPLETE IDENTITY LLC

Article II

The street address of the principal office of the Limited Liability Company is:

4613 N UNIVERSITY DRIVE
#224
CORAL SPRINGS, FL. US 33067

The mailing address of the Limited Liability Company is:

4613 N UNIVERSITY DRIVE
#224
CORAL SPRINGS, FL. US 33067

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:

MICHAEL MAGOLNICK
4613 N UNIVERSITY DRIVE
#224
CORAL SPRINGS, FL. 33067

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: MICHAEL MAGOLNICK

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Article V

The name and address of managing members/managers are:

Title: MGRM
MICHAEL MAGOLNICK
4613 N. UNIVERSITY DRIVE, #224
CORAL SPRINGS, FL. 33067 US

Title: MGRM
CRAIG MORA
4613 N. UNIVERSITY DRIVE, #224
CORAL SPRINGS, FL. 33067 US

Article VI

The effective date for this Limited Liability Company shall be:

08/05/2004

Signature of member or an authorized representative of a member

Signature: MICHAEL MAGOLNICK