Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

: A.B.S. OF JACKSONVILLE, INC. Account Name

Account Number : I20010000215 Phone : (904)777-1533

: (904)777-1717 Pax Number

LIMITED LIABILITY COMPANY

Hammerhead Services, LLC

Certificate of Status	1
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Corporate Filing

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE J. NAME:

The name of the Limited Liability Company is: Hammerhead Services, LLC

ARTICLE II. ADDRESS:

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

7564 Wondell Drive Jacksonville, FL 32210

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: Andrew Walker, MGR.
7564 Wendell Drive
Jacksonville, Fl. 32210

llaving been named as registered agent and to accept service of process for the above stated limited liability company at the place of designated in this certificate, I hereby accept the appointment as registered accept 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 positionals registered agent as provided for in Chapter 608, Florida Statutes.

Andrew Walker/ Registered Agent

May 23 265

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title: MGR Name and Address: Andrew Walker 7564 Wendell Drive Jacksonville, FL 32210

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REQUIRED SIGNATURE:

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this day of Moul . 2005.

Andrew Walker, Member

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penaltics of perjury that the facts stated herein are true.)

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