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Florida Department of State
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Advanced Analytics LLC

Certificate of Status	0
Certified Copy	1
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M. Thomas AUG 19 2005

FAX AUDIT # 4050001981713

**ARTICLES OF ORGANIZATION
OF
Advanced Analytics LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Advanced Analytics LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 220 84th Street, Holmes Beach, Florida 34217.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Brian DiVita, 220 84th Street, Holmes Beach, Florida 34217. Located in the County of Manatee.


ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2045.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Brian DiVita, 220 84th Street, Holmes Beach, Florida 34217


Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Advanced Analytics LLC**

The name and address of the registered agent and office is Brian DiVita, 220 84th Street,
Holmes Beach, Florida 34217. Located in the County of Manatee.

Having been named as registered agent and to accept service of process for the above
stated 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.

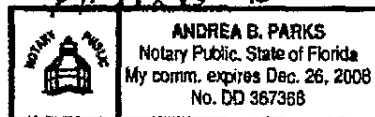
Signature: Brian DiVita

Brian DiVita

Date: August 8, 2005

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of Florida
County of Manatee
Sworn to and subscribed before
me this 11 day of Aug, 2005
by Brian DiVita, who
produced Driv. Lic. as
identification.

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