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05 SEP -9 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE
09/01/05

Barbara M. McCoy
1915 Cedarbrooke Drive
Lutz FL 33549

September 9, 2005

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Gentlemen:

Enclosed are the Articles of Organization for

BARBARA McCOY TRANSCRIPTION SERVICE LLC

and our check in the amount of \$125.00 to cover the Filing Fee (\$100.00) and Designation of Registered Agent (\$25.00).

Sincerely,


Organizer

ARTICLES OF ORGANIZATION
for
BARBARA McCOY TRANSCRIPTION SERVICE LLC
(A Florida Limited Liability Company)

ARTICLE 1 - Name

The name of this Limited Liability Company is Barbara McCoy Transcription Service LLC.

ARTICLE 2 - Address

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

1915 Cedarbrooke Drive
Lutz FL 33549

ARTICLE 3 - Registered Agent

The name and street address of the registered agent is

S. L. Stafford
15951 North Florida Avenue
Lutz, Florida 33549

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ARTICLE 4 - Management

This Limited Liability Company is to be managed by one manager, and is therefore a manager-managed company.

ARTICLE 5 - Effective Date

The effective date for beginning of business for this Limited Liability Company is to be September 1, 2005.

Barbara M. McCoy
Signature

09/09/05
Date

(I understand that in accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Barbara M. McCoy, signer

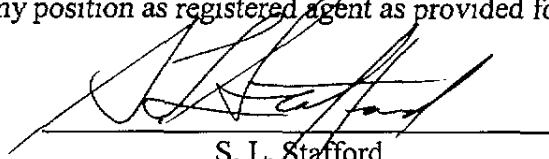
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09/01/05

ACCEPTANCE OF SERVICE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for

BARBARA McCOY TRANSCRIPTION SERVICE LLC

at the place designated in the attached Articles of Organization, 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 complete and proper performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



S. L. Stafford
15951 N. Florida Ave.
Lutz, FL 33549

9-9-05

Date

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