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01/24/06-ni013-006 **160.

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: F1 Computer Consultinos (Name of Limited Liability Company)					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Mark Douglas Williams (Name of Person)					
F1 Computer Consulting (Firm/Company)					
4578 Redmond Place (Address)					
Sanford, Florda 32771 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Mark Williams at 407, 463-2575 (Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \$\bigcup \\$155.00 Filing Fee & \$\bigcup \\$160.00 Filing Fee, \$\bigcup \\$Certificate of Status & Certified Copy (additional copy is enclosed)					
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					

06 JAN 24 AM 10: 49

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
F1 Compuber Con Sultin (Must end with the words "Limited Liability Company, "Limited	G, LLC d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4578 Redmond Place Sanford, FL 32771	4578 Redmond Place Sanford, FL 32771
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another.

ARTICLE I - Name:

The name and the Florida street address of the registered agent are:

business entity with an active Florida registration.)

Mark Douglas Williams

4578 Redmont Pl.

Florida street address (P.O. Box NOT acceptable)

Sanford, FL 32771
City, State, and Zip

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 as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV	- Manager(s)	or Managing	Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Mark Douglas Williams 4578 Redmand PL Sanford, FL 32771
. :	
(Use attachment if necessary)	ALLA COMAG
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s to or 90 days after the date of filing.)	specific and cannot be more than five business days prior
wor 70 days after the date of filmg.)	CF S FLC
REQUIRED SIGNATURE:	IO: 49
ma	ik William
Signature of a member	or an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
Mark Dou	AG OS Williams d or printed name of signee
Filing Fees:	-
\$125.00 Filing Fee for Articles of Organic of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	zation and Designation

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