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To: Division of Corporations  
Fax Number : (850) 205-0383  
From: *Reg. Record, Legal Dept.*  
Account Name : AKERMAN, SENTERFITT & BIDSON, P.A.  
Account Number : 075471001363  
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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SERVICE GREENVILLE, LLC

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
OF  
SERVICE GREENVILLE, LLC**

**ARTICLE I: - Name**

The name of the Limited Liability Company is: **Service Greenville, LLC**

**ARTICLE II: - Address**

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

401 E. Las Olas Boulevard  
Suite 1140  
Fort Lauderdale, Florida 33301

**ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

American Information Services, Inc.  
One Southeast Third Avenue, 28<sup>th</sup> Fl  
Miami, Florida 33131

*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.*

American Information Services, Inc.

By: *Nery C. Toledo*, *Asst. Sec.*  
Nery C. Toledo, Assistant Secretary  
Registered Agent

*Grace Laba*  
Grace Laba, Esq.  
Authorized Representative of a Member

Signed and dated this 28 day of February, 2006.