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(Requestor's Name)

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(City/State/Zip/Phone #)

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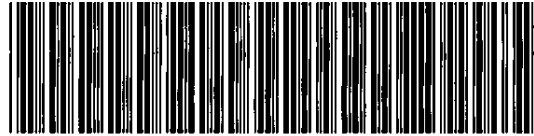
(Business Entity Name)

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2006 JUL -3 PM 2:24
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TALLAHASSEE, FLORIDA

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06 JUL -3 PM 12:41
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 220921 4813875

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 125.00

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2006 JUL -3 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : June 30, 2006

ORDER TIME : 10:34 AM

ORDER NO. : 220921-005

CUSTOMER NO: 4813875

DOMESTIC FILING

NAME: THE ROD SMITH CONSULTING GROUP
LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Rod Smith Consulting Group LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

9991 Watermark Lane West

Jacksonville, FL 32256

Mailing Address:

9991 Watermark Lane West

Jacksonville, FL 32256

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Rod Smith

Name

9991 Watermark Lane West

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

Jacksonville

FL 32256

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)

Rod Smith

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Page 1 of 2

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

"MGRM" = Managing Member

Jacksonville, FL 32256

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

URE:

[Handwritten signature]

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

Typed or printed name of signer

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)