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INC. 236 East 6th Avenue . Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666		
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SPECIAL INSTRUCTIONS:		

ARTICLES OF ORGANIZATION OF HODGES CONSULTING SERVICES, LLC



The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be Hodges Consulting Services, LLC ("Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company in Florida is 2035 Hawaii Avenue NE, St. Petersburg, FL 33703.

ARTICLE III - DURATION

The Company's existence shall commence upon the acceptance of the Article s of Organization by the Florida Department of State and shall continue in existence until the expiration of fifty (50) years from such commencement date, unless sooner terminated, liquidated or dissolved by law or by the unanimous consent of the Member(s).

ARTICLE IV - MANAGEMENT

The Company shall be managed by one or more managing members in accordance with the Operation Agreement adopted by the members for the management of the business and affairs of the Company. This Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the initial managing member of the Company is: Olivia Hodges, 2035 Hawaii Avenue NE, St. Petersburg, FL 33703

ARTICLE V - ADMISSION OF NEW MEMBERS

The right, if given, of the members to admit additional members and the terms and conditions of the admission shall be:

The manager may admit new members in its sole and unfettered discretion subject only to the condition that such additional member must agree in writing to be bound as a member by the Operating Agreement of the Company.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the limited liability company to continue the business on death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall not terminate the company, and the business of the company shall be automatically continued, so long as there is at least one remaining member.

IN WITNESS WHEREOF, the undersigned as a member has made and subscribed these Articles of Organization this $\underline{30}$ day of June, 2006.

DLIVIA HODGES, Member

STATE OF FLORIDA COUNTY OF PINELLAS

The foregoing instrument was acknowledged before me this 2000 day of June, 2006, by Olivia Hodges, as Manager of Hodges Consulting Services, LLC, who is personally known to me or produced as identification.

Witness my hand and official seal in the county and state last aforesaid on the day and year first written above.

Notary Public State of Florida My Commission Expires:



ACCEPTANCE OF REGISTERED AGENT

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned limited liability company submits the following statement to designate a Registered Office and Registered Agent in the State of Florida:

The name of the limited liability company is: Hodges Consulting Services, LLC.

The name and Florida street address of the Registered Agent are: Olivia Hodges, 2035 Hawaii Avenue NE, St. Petersburg, FL 33703.

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.

OLIVIA HODGE