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From:

*Aug. C. Pineda, Bonalaga*  
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.  
Account Number : 075471001363  
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DIVISION OF CORPORATIONS

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**OUTCOME BASED DELIVERY SYSTEMS, LLC**

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF ORGANIZATION  
OF  
OUTCOME BASED DELIVERY SYSTEMS, LLC**

**ARTICLE I: - Name**

The name of the Limited Liability Company is: **Outcome Based Delivery Systems, LLC**

**ARTICLE II: - Address**

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

2825 North State Road 7  
Suite 204  
Margate, Florida 33063

**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.

  
Nery C. Toledo, Assistant Secretary  
Registered Agent

  
Paul A. Shelowitz, Esq.  
Authorized Representative of a Member

Signed and dated this 31 day of August, 2006.

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