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**Florida Department of State
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Visio Consulting, LLC

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED
LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I: NAME

The name of the Limited Liability Company is:

VISIO CONSULTING, LLC

ARTICLE II: Address

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

5709 MAGGIORE TRAIL
ZELLWOOD FLORIDA 32798

The Mailing address is:

PO BOX 999
ZELLWOOD FLORIDA 32798

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED
AGENT SIGNATURE**

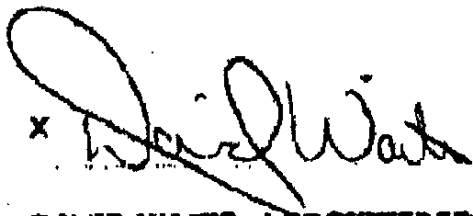
The name and the Florida street address of the registered agent are:

DAVID WAITS

5709 MAGGIORE TRAIL

ZELLWOOD FLORIDA 32798

Having been named as registered agent 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.

x 

DAVID WAITS / REGISTERED AGENT'S SIGNATURE

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VISIO CONSULTING, LLC

ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V: MEMBERS (optional)

MANAGING MEMBER:

DAVID WAITS

PO BOX 999

ZELLWOOD FLORIDA 32798-0999

MANAGING MEMBER:

LAUREN WHITE

PO BOX 999

ZELLWOOD FLORIDA 32798-0999

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x 

Signature of a member or an authorized representative of a member

(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.)

DAVID WAITS

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