Florida Department of State

Division of Corporations Public Access System

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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 Phone : (800)494-3124

Fax Number : (305) 675-2811

RECEIVED

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SECREDARY OF STATE

ELORIDA/FOREIGN LIMITED LIABILITY CO.

ACCELERATE CONSULTING SERVICES, 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:

ACCELERATE CONSULTING SERVICES, LLC

ARTICLE II ADDRESS

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

145 S ORLANDO AVE STE 11

MAITLAND FL 32751-5634

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGE

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

CHRIS WARD 604 MINNEHAHA LN MAITLAND, FL 32751

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.

CHRIS WARD / Registered Agent's Signature

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a member-managed company.

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ARTICLE V MEMBERS (optional)

MANAGING MEMBER: CHRIS WARD 604 MINNEHAHA LN MAITLAND, FL 32751

MANAGING MEMBER: LAKHANA DOOMKUN 604 MINNEHAHA LN MAITLAND, FL 32751 07 FEB 16 AM 8: 43
SECRETARY OF STATE

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.

LAKHANA DOOMKUN
Typed or printed name of signee