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COVER LETTER

TO: Registration : Division of C			
SUBJECT: FO	C ASSOCIATE	5, LLC	
		f Limited Liability Con	mpany)
Dear Sir or Madam:			
	-6 Como di co co d 6 co(s) so	him.d for films	
	of Correction and fee(s) as	_	
Please return all corre	spondence concerning this	matter to the following	g:
FRESERI	(Name of Person)		
	(Name of Person)		_
FOC ASSOC	PIATES LLC (Firm/Company)		_
	(Firm/Company)		
9100 Q	(Address)		_
	(Address)		_
JUPITE	R, FL 33	478	· -
	(Chyrotate and Zip Code)		
For further informatio	n concerning this matter, p	olease call:	
FREDER	ICK COX	at (561	427-8692 Daytime Telephone Number)
(Nar	ne of Person)	(Area Code &	2 Daytime Telephone Number)
STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, Florida 3	ons r Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check f	or the following amount:		
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	□\$60 Filing Fee, Certificate of Status & Certified Copy

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST:	The name of the limited liability company is: FOC ASSOCIATES, CC	<u>c</u>
SECON	ND: The articles of organization or the application to transact business	
(CHI	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
_	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:	_
_	INCORRECT BARBARA RYENAUD	_
(-	COPRECT BARBARA REYNAUD	_
_		<u></u>
'	OR Was defectively signed. The manner in which the document was defectively signed and	1
t -	the appropriate correction are as follows:	
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-		ECRETARY SION OF C
Dated:	(ane 25) . 2007.	
	1 / 8 / -	3 O.A.
	Signature of a member or authorized representative of a member	
	Typed or printed name of signee	
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

Electronic Articles of Organization For Florida Limited Liability Company

L07000063917 FILED 8:00 AM June 18, 2007 Sec. Of State mthomas

Article I

The name of the Limited Liability Company is: FDC ASSOCIATES, LLC.

Article II

The street address of the principal office of the Limited Liability Company is: 9100 QUAIL TRAIL JUPITER, FL. US 33478

The mailing address of the Limited Liability Company is:

9100 QUAIL TRAIL JUPITER, FL. US 33478

Article III

The purpose for which this Limited Liability Company is organized is: OUTSOURCED TECHNOLOGY AUDITING, SARBANES-OXLEY.

Article IV

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

AMERICAN SAFETY COUNCIL, INC. 5125 ADANSON ST SUITE 500 ORLANDO, FL. 32804

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.

Registered Agent Signature: LAURA REGIER

Article V

The name and address of managing members/managers are:

Title: MGRM FREDERICK COX 9100 QUAIL TRAIL JUPITER, FL. 33478 US

Title: MGRM BARBARA RYENAUD 5105 SW 63RD COURT MIAMI, FL. 33155 US

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Article VI

The effective date for this Limited Liability Company shall be: 06/15/2007

Signature of member or an authorized representative of a member Signature: FREDERICK D. COX