Electronic Articles of Organization
For
Florida Limited Liability Company

L07000068576
FILED 8:00 AM
June 29, 2007
Sec. Of State
dbruce

Article I

The name of the Limited Liability Company is:

CATALYST INSURANCE CLAIMS CONSULTANTS, LLC

Article II

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

1245 SCHOONER LANE
VENICE, FL. 34285

The mailing address of the Limited Liability Company is:

PO BOX 1075
VERNICE, FL. 34284

Article III

The purpose for which this Limited Liability Company is organized is:

INSURANCE PROPERTY CLAIMS CONSULTANTS FOR INDIVIDUAL PROPERTY OWNERS AND BUSINESSES.

Article IV

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

MICHAEL BARRAL
1245 SCHOONER LANE
VENICE, FL. 34284

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: MICHAEL BARRAL

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Article V

The name and address of managing members/managers are:

Title: MGRM
MICHAEL BARRAL
1245 SCHOONER LANE
VENICE, FL. 34285

Title: MGRM
HARVEY WOLFMAN
1245 SCHOONER LANE
VENICE, FL. 34285

Article VI

The effective date for this Limited Liability Company shall be:

06/28/2007

Signature of member or an authorized representative of a member

Signature: MICHAEL BARRAL