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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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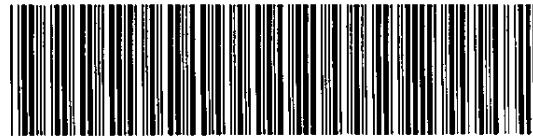
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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 038433 7117422
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 155.00

FILED
07 AUG -2 2007 3:50 PM
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TALLAHASSEE, FLORIDA

ORDER DATE : August 2, 2007
ORDER TIME : 12:16 PM
ORDER NO. : 038433-005
CUSTOMER NO: 7117422

DOMESTIC FILING

NAME: INTERNATIONAL NURSING SCHOOLS NETWORK, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kathy Drake - EXT. 2959

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION OF
INTERNATIONAL NURSING SCHOOLS NETWORK, LLC
A LIMITED LIABILITY COMPANY**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I

The name of the Limited Liability Company is: INTERNATIONAL NURSING SCHOOLS NETWORK, LLC.

ARTICLE II

The street address of the principal office of the Limited Liability Company is: 200 Ocean Crest Drive, Suite 108, Palm Coast, FL 32137. The mailing address of the principal office of the Limited Liability Company is: P.O. Box 353154, Palm Coast, FL 32135.

ARTICLE III

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV

The Limited Liability Company is to be managed by a manager or managers, as may be set forth in the Operating Agreement. Until otherwise provided in the Operating Agreement, the name and address of the initial Manager(s) shall be:

Mercelita S. Maceda, P.O. Box 353154, Palm Coast, Florida 32135.

ARTICLE V

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be set forth in the Operating Agreement.

I have signed these Articles of Organization and acknowledged them to be my act
this 30 day of July, 2007.

By: _____

B. PAUL KATZ, AGENT

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED FOR
INTERNATIONAL NURSING SCHOOLS NETWORK, LLC**

IN COMPLIANCE WITH SECTION 608.507, FLORIDA STATUTES, THE
FOLLOWING IS SUBMITTED:

FIRST: THAT THE UNDERSIGNED AGENT, DESIRING TO ORGANIZE OR
QUALIFY THE ABOVE REFERENCED LIMITED LIABILITY COMPANY UNDER THE
LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT
200 OCEAN CREST DRIVE, SUITE 108, PALM COAST, FLORIDA, 32137, HAS NAMED
B. PAUL KATZ, LOCATED AT ATRIUM SUITE, 1 FLORIDA PARK DRIVE SOUTH,
PALM COAST, FLORIDA 32137, AS ITS REGISTERED AGENT AND OFFICER TO
ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.



B. PAUL KATZ, AGENT

DATE: 7/30/07

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-
STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN THIS
CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER
AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.



REGISTERED AGENT

DATE: 7/30/07