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Division of Corporations

Fax Number : (850)617-6383

Account Name : SHUFFIELD LOWMAN

Account Number : I20030000118 Phone : (407)581-9800

Fax Number

: (407)581-9801

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RiskAware, LLC

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Eiling Menu

Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION OF RISKAWARE, LLC A Florida Limited Liability Company



ARTICLE I NAME

The name of this limited liability company is RiskAware, LLC referred to in these Articles of Organization as the "Company".

ARTICLE II MAILING AND STREET ADDRESS

The mailing address and street address of the principal office of the Company are as follows:

301 E. Pine Street, Suite 350 Orlando, Florida 32801

ARTICLE III COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 608.409(1), Florida Statutes, the Company's existence shall be deemed to have commenced on December 3, 2007, or if later, such date as if five (5) business days prior to the date on which these Articles of Organization are filed by the Florida Department of State.

ARTICLE IV REGISTERED AGENT

The address of the initial Registered Office and the Registered Agent at such address are as follows:

William R. Lowman, Jr., Esq. ShuffieldLowman 1000 Legion Place, Suite 1700 Orlando, FL 32801 (((H07000290779 3)))

ARTICLE V MANAGEMENT

The Company is to be a manager-managed company. A manager may receive compensation for his services. The name and address of the initial manager is as follows:

Paul R. Hughes 301 E. Pine Street, Suite 350 Orlando, Florida 32801

ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 608, Florida Statutes, and shall be governed by the laws of the State of Florida.

William R. Lowman, Jr., as Authorized Representative

ACCEPTANCE OF DESIGNATION
OF
REGISTERED AGENT

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 as provided for in Chapter 608 of the Florida Statutes.

William R. Lowman, Jr.