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PICK-UP	MAIT WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

EFFECTIVE DATE 1-1-08



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SECRETARY OF STATE
TALLAHASSEF FINDER

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## **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJ	ECT: Florida Forensic Imag	ing, LLC.					
3000		imited Liability Com	pany)		<del></del>		
The er	nclosed Articles of Organization and fee(s)	are submitted for fili	ng.				
Please	return all correspondence concerning this	matter to the followir	ıg:				
	Douglas Flores						
		(Name of Person)			<del>-</del>		
	Hart Questioned Docume	nt Laborator	/. Inc.				
		(Firm/Company)					
	7990 SW 117th Avenue, 5	Suite. 134			SECK FALLA	07 08	C.
		(Address)			大学	OEC 2	L. A.T.
	Miami, FL 33183				500		444
		(City/State and Zip Cod	ie)	•	T (2)	=	1
For fu	rther information concerning this matter, pl	ease call:		·	TATE ORIDA	AH II: 10	
Dou	glas Flores	at ( 305	, 282-449	2			
	(Name of Person)	<del></del>	de & Daytime Tel	ephone Number)			
Enclo	sed is a check for the following amount	<b>:</b>					
<b>]\$</b> 125	.00 Filing Fee \$130.00 Filing Fee Certificate of Status	Certified Co	_	\$160.00 Filin Certificate of Certified Co (additional cop	of Status opy		
	Mailing Address Registration Section Division of Corporatio P.O. Box 6327 Tallahassec, FL 32314	Registra Division Clifton 2661 Ex	Courier Address tion Section to of Corporations Building (secutive Center Cossee, FL 32301	s			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Florida Forensic Imaging, LL (Must end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11226 SW 156th Place	7990 SW 117th Avenue, Suite. 134
Miami, FL 33196	Miami, FL 33183
	egistered Office, & Registered Agent's Signature:
	s own Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.	s own Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.  The name and the Florida street addres	s own Registered Agent. You must designate an individual or another of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.  The name and the Florida street addres	s own Registered Agent. You must designate an individual or another the set of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address  Douglas Flore  11226 SW 15	s own Registered Agent. You must designate an individual or another the set of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address  Douglas Flore  11226 SW 15	sown Registered Agent. You must designate an individual or another of the registered agent are:  Solution  Solution

Registered Agent's Signature (REQUIRED)

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..

EFFECTIVE DATE 1-1-08

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

(CONTINUED) Page 1 of 2

<u>Title:</u>		Name and Address:
"MGR" = Mana "MGRM" = Ma	iger naging Member	·
MGR		Douglas Flores
		11226 SW 156th Place
		Miami, FL 33196
	e date, if other than the costed, the date must be	date of filing: JAN. 1, 2008 . (OPTIONAL) specific and cannot be more than five business days pr
CLE V: Effective effective date is li	e date, if other than the costed, the date must be late of filing.)	
CLE V: Effective effective date is li 90 days after the d	e date, if other than the costed, the date must be late of filing.)  IGNATURE:	specific and cannot be more than five business days pr
ICLE V: Effective effective date is li 90 days after the d	date, if other than the date, the date must be late of filing.)  IGNATURE:  Signature of a member  (In accordance with sect	

ARTICLE IV- Manager(s) or Managing Member(s):

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)