

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L08000013449
FILED 8:00 AM
February 06, 2008
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:
BENEFIT PROFESSIONALS, LLC.

Article II

The street address of the principal office of the Limited Liability Company is:
23246 GRACEWOOD CIRCLE
LAND O LAKES, FL. US 34639

The mailing address of the Limited Liability Company is:
23246 GRACEWOOD CIRCLE
LAND O LAKES, FL. US 34639

Article III

The purpose for which this Limited Liability Company is organized is:
DELIVERY SERVICE.

Article IV

The name and Florida street address of the registered agent is:
AL DERENCHES
23246 GRACEWOOD CIRCLE
LAND O LAKES, FL. 34639

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: AL DERENCHES

Article V

The name and address of managing members/managers are:

Title: MGRM
AL DERENCHES
23246 GRACEWOOD CIRCLE
LAND O LAKES, FL. 34639 US

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Article VI

The effective date for this Limited Liability Company shall be:

02/05/2008

Signature of member or an authorized representative of a member

Signature: AL DERENCHES