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Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : MIZELL LAW FIRM, P.A.
Account Number : 120060000056
Phone : (941) 575-9291
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FLORIDA/FOREIGN LIMITED LIABILITY CO.**Professional Credit Restoration Consultants, LLC**

Certificate of Status	0
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T. HAMPTON**EXAMINER**

**ARTICLES OF ORGANIZATION
OF
PROFESSIONAL CREDIT RESTORATION CONSULTANTS, LLC**

Pursuant to Section 608.407, Florida Statutes, these Articles of Organization for a limited liability company provide that:

ARTICLE I - NAME

The name of the limited liability company is PROFESSIONAL CREDIT RESTORATION CONSULTANTS, LLC.

ARTICLE II - ADDRESS

The mailing address is 3821-B Tamiami Trail, #304, Port Charlotte, Florida 33952-8377 and street address of the principal office of the limited liability company is 3520 Middletown Street, Port Charlotte, Florida 33952.

ARTICLE III - REGISTERED AGENT

The name and street address of the initial registered agent for service of process is Martin R. Huxstep, 3520 Middletown Street, Port Charlotte, Florida 33952.

ARTICLE IV - MANAGEMENT

The Company shall be a member managed company.

ARTICLE V - DURATION

The duration of this Company shall be perpetual.

ARTICLE VI - PURPOSE

The purpose for which this Company is formed is to engage in any lawful acts or activities for which limited liability companies may be formed under Section 608.403 of the Florida Statutes.

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IN WITNESS WHEREOF, the undersigned, has hereunto subscribed their name and affixed their seal this 8th day of FEBRUARY, 2008.

Witnesses:

Carol L. Kyre

Print Name: CAROL L. KYRE

Raemonia J. Carter

Print Name: RAEMONIA J. CARTER

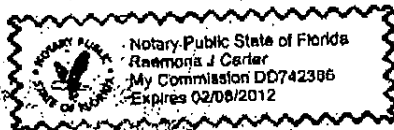
Martin R. Huxstep

MARTIN R. HUXSTEP, managing member

STATE OF FLORIDA:
COUNTY OF CHARLOTTE:

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgment, personally appeared MARTIN R. HUXSTEP to me known to be the person described as incorporator or who has produced a FLORIDA Drivers License as identification, and who executed the foregoing Articles of Organization, and he acknowledged that he executed the same for the purposes therein stated and did not take an oath.

On WITNESS my hand and official seal in the State and County aforesaid this day of February, 2008.



Raemonia J. Carter
Printed Name: RAEMONIA J. CARTER
Notary Public
State of Florida
Commission Number: DD742366
Commission Expiration Date 2-8-2012

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA:

1. The name of the limited liability company is PROFESSIONAL CREDIT RESTORATION CONSULTANTS, LLC.
2. The name and address of the registered agent and office is:

Martin R. Huxstep, 3520 Middletown Street, Port Charlotte, Florida 33952.

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.



Martin R. Huxstep

Dated: FEBRUARY 8 2008

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