Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000185430 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)617-6383

Account Name : CSH SERVICES, LLC

Account Number : 120070000160

Phone

(800) 494-3124

Fax Number

ORIDA/FOREIGN LIMITED LIABILITY CO.

TRUSTED FIELD SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

T. HAMPTON

AUG - 1 2008

EXAMINER



OI ·

H. 880001854803

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608 and/or 621,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

TRUSTED FIELD SERVICES LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Dimited Liability Company is:

21201 SW 187TH AVENUE MIAMI, FLORIDA 33187

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are:

EDUARDO POLLO

21201 SW 187TH AVENUE

MIAMI, FLORIDA 33187

Having been named as registered agent 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, F.S.

EDUARDO POLLO / Registered Agent's signature

A.08000185430.3

PAGE 2

TRUSTED FIELD SERVICES LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more member and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
VICTOR LANTIGUA
17184 SW 143RD PLACE
MIAMI, FLORIDA 33177

MANAGING MEMBER
EDUARDO POLLO
21201 SW 187TH AVENUE
MIAMI, FLORIDA 33187

FILED

08 JUL 31 MI 7: 56

SECRETARY OF CIATE

TALLAHASSEF FIGURE

Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

EDUARDO POLLO