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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJECT: Xact Property Claims, LLC (Name of Limited Liability Company)			
Please return all correspondence concerning this matter to the following:			
Richard Carson			
	(Name of Person)		
Xact Property Claims, LLC			
	(Firm/Company)		
1373 Razorbill Lane			
(Address)			
Punta Gorda, FL 33983			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Rich	ard Carson _{at (} 941 ₎ 628-2390		
	(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
\$ 125.	00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:	
Xact Property Claims, LLC (Must end with the words "Limited Lia	bility 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:	
1373 Razorbill Lane Punta Gorda, FL 33983	Same	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the Richard Carson	· · · · · · · · · · · · · · · · · · ·	
Nan	ne .	
1373 Razorbill Lan	e ·	
Florida street address (P.O. Box NOT acceptable)		
Punta Gorda, FL 3398ֆ		
City, State	e, and Zip	
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as sity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S	
Registered Agent's Sign	nature (REQUIRED)	

(CONTINUED)
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The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Richard Carson 1373 Razorbill Lane Punta Gorda, FL 33983 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.)

Richard Carson

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

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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