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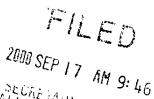
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	_{IECT:} ComputerAider, LLC		
		nited Liability Comp	pany)
The e	nclosed Articles of Organization and fee(s) a	re submitted for filir	ng.
Please	e return all correspondence concerning this m	atter to the followin	g:
	LINDA M. HARTIGAN	<u>.</u>	
		(Name of Person)	
	ComputerAider, LLC	,	
		(Firm/Company)	
	3151 SEAN WAY		
		(Address)	
	PALM HARBOR, FL 34684	1	
	(0	City/State and Zip Coo	e)
For fu	rther information concerning this matter, plea	ase call:	
LIN	DA M. HARTIGAN	at (727	831-4331
	(Name of Person)	(Area Co	de & Daytime Telephone Number)
Enclo	sed is a check for the following amount:		
□\$12 <i>5</i>	5.00 Filing Fee \$\int\\$130.00 Filing Fee &\text{Certificate of Status}		
	Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Registra s Divisior Clifton l 2661 Ex	tion Section of Corporations Building ecutive Center Circle see, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

ComputerAider, LLC
(Must end with the words "Limited 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:		
3151 SEAN WAY	3151 SEAN WAY		
PALM HARBOR, FL 34684	PALM HARBOR, FL 34684		

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

LINDA M. HARTIGAN

Name

3151 SEAN WAY

Florida street address (P.O. Box NOT acceptable)

PALM HARBOR, FL 34684

City, State, and Zip

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 as provided for in Chapter 608, F.S..

Kinda M. (Kerligur Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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ARTICLE	IV-	Mana	ger(s) (or Manag	ging M	ember(s):
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The name and address of each Manager or Managing Member is as follows: 2008 SEP 17 AH 9: 46

<u>Title:</u> "MGR" = Manager	Name and Address:	FALLAHASSEE. FLORID
"MGRM" = Managing Member		
MGR	LINDA M. HARTIGAN	
	3151 SEAN WAY	
	PALM HARBOR, FL 34684	
 		
		
		
		

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October 1, 2008 . (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.)

Linda M. Hartigan
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)