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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC
Account Number : T20070000160
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FLORIDA/FOREIGN LIMITED LIABILITY D. BRUCE

ULTIMATE PROTECTION SERVICES LLC

JAN 27 2009

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

ULTIMATE PROTECTION SERVICES LLC

ARTICLE II ADDRESS

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

2655 COLLINS AVENUE #1809
MIAMI BEACH, FLORIDA 33140

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

NENAD PETROVIC
2655 COLLINS AVENUE #1809
MIAMI BEACH, FLORIDA 33140

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.

x Nenad Petrovic

NENAD PETROVIC / Registered Agent's signature

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ARTICLE IV MANAGEMENT

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

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
NENAD PETROVIC
2655 COLLINS AVENUE #1809
MIAMI BEACH, FLORIDA 33140

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.....

x Nenad Petrovic

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.

NENAD PETROVIC

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