

# W09 000030660

## Florida Department of State

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

From: Account Name : CSII SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

2009 MAR 30 AM 8:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

### Independent Resource Facilitation, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
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**T. CLINE**

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**EXAMINER**

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**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:

INDEPENDENT RESOURCE FACILITATION, LLC

**ARTICLE II ADDRESS**

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

7359 HERITAGE PALMS ESTATE DR  
FORT MYERS, FLORIDA 33866**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

A1A REGISTERED AGENT INC.  
5647 110TH AVENUE NORTH  
ROYAL PALM BEACH, FLORIDA 334112009 MAR 30 AM 8:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

*Tim Dineen* Tim Dineen 3/30/09  
A1A REGISTERED AGENT INC. / Registered Agent's signature

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INDEPENDENT RESOURCE FACILITATION, LLC

**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

JILLIAN AYERS

7359 HERITAGE PALMS ESTATE DR

FORT MYERS, FLORIDA 33866

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

x Jillian M. Ayers

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.

JILLIAN AYERS