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Division of Corporations
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To:
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From:
 Account Name : MCLEOD, MCLEOD & MCLEOD, P.A.
 Account Number : 076635001571
 Phone : (407) 886-3300
 Fax Number : (407) 886-0087

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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RailTrax Consultants, LLC

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S. HAWKES
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* * * Communication Result Report (Jun. 10. 2009 12:39PM) * * *

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Date/Time: Jun. 10. 2009 12:29PM

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To: Division of Corporations
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6/10/2009

Should be
back dated
to reflect
the LLC previously filed
6/10/08.

RE FAXED
6/16/09

(((H09000139999 3)))

ARTICLES OF ORGANIZATION
FOR
RAILTRAX CONSULTANTS, LLC
a Florida Limited Liability Company

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, Florida Statutes, the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such Company:

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09 JUN 10 AM 5:48
STATE OF FLORIDA
SECRETARY OF STATE

ARTICLE I
Name

The name of this Company shall be RAILTRAX CONSULTANTS, LLC.

ARTICLE II
Duration

The term of existence of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III
Mailing Address

The mailing address is 8022 St. James Way, Mount Dora, Florida 32757. The street address is 8022 St. James Way, Mount Dora, Florida 32757.

ARTICLE IV
Registered Agent and Office

The name and street address of the initial registered agent and office for this Company is as follows: STEPHEN C. CHAMBERS, 8022 St. James Way, Mount Dora, Florida 32757.

ARTICLE V
Admission of Additional Members;
Terms and Conditions of such Admissions

Additional Members may be admitted upon unanimous consent of the Members of the Company, upon the written application of the applicant, in the manner set forth in the Operating Agreement of this Company.

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IN WITNESS WHEREOF, the undersigned has hereunto set his hand this 10th day of June, 2009.

Stephen C. Chambers
STEPHEN C. CHAMBERS

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 10th day of June, 2009, by STEPHEN C. CHAMBERS, who (✓ one) is personally known to me or _____ produced _____ as identification.

(SEAL)

Raymond A. McLeod
NOTARY PUBLIC

RAYMOND A. MCLEOD
Commission DD 738778
Print Name: _____ Expires March 25, 2012
My Commission Expires: _____
Bonded Through Fidelity Insurance 800-367-7619

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TALLAHASSEE, FLORIDA

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