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To:

Division of Corporations

Fax Number : (8

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From:

Account Name : CSH SERVICES, LLC

Account Number : I2007/0000160 Phone : (800):494-3124

Fax Number : (561;455-9885

FILED 2009 SEP 24 M 8: 07 SECRETARY OF STATE TALLAHASSEE. FLORII

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CNS SERVICES, LLC

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C. LEWIS
SEP 2 5 2009

**EXAMINER** 

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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:

CNS SERVICES, LLC

ARTICLE II ADDRESS

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

1456 LA PALOMA CIRCLE WINTER SPRINGS, FLORIDA 32708

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

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

CARMELO PADILLA 1456 LA PALOMA CIRCLE WINTER SPRINGS, FLORIDA 32708

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.

CARMELO PADILLA / Registered Agent's signature

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ARTICLE IV MANAGEMENT

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

## ARTICLE V MEMBERS (optional)

MANAGING MEMBER
CARMELO PADILLA
1456 LA PALOMA CIRCLE
WINTER SPRINGS, FLORIDA 32708

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SECRETARY OF STATE A

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.

CARMELO PADILLA