Division of Corporations

Page 1 of 1



Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000217659 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COURT ACCESS CENTERS OF AMERICA

Account Number: 075350000541

Phone : (813)875-1333 Fax Number : (813)875-2703

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Constance A. Cabana, LLC

Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$130.00

C. LEWIS OCT 1 3 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

Audit # H09000217659

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name and Address

The name of this Limited Liability Company is:

Constance A. Cabana, LLC

The mailing address and street address of the Limited Liability Company are

19116 White Wing Place Tampa, FL 33647-3003

ARTICLE II Term of Existence

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

ARTICLE III Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

ARTICLE IV

Powers

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3249 W Cypress St., Suite C. Tampa, FL 33607, (813)-875-1333.

Oct 12 08 10:28a

Cabana

813 972 3275

D. 1

Audit # H09000217659

ARTICLE V Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is:

19116 White Wing Place Tampa, FL 33647-3003

and the name of its registered agent at such address is:

Constance A. Cabana

ARTICLE VI Management

This Limited Liability Company shall have One Manager(s) or Managing Member(s). The name and address of Manager(s) or Managing Member(s) are:

Name and Address

Constance A. Cabana, Managing Member 19116 White Wing Place Tampa, FL 33647-3003

Dated: Monday, October 12, 2009

Constance A Cabana

2009 OCT 12 M 8: 09
SECRETARY OF STATE
SECRETARY OF FLORIDA

Opt 12 09 10:28a

Cabana

813 972 3275

P. 2

Audit # H09000217659

ACCEPTANCE BY REGISTERED AGENT

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.

Date: October 12, 2009

Constance A. Cabana

2003 OCT 12 AM 8: 09
SECRETARSEE. FLORIDO
TRECARTASSEE. FLORIDO