

40000012635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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10 FEB -2 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

FEB 3 2010

EXAMINER

EFFECTIVE DATE

1/29/10

**ARTICLES OF ORGANIZATION
OF
MAYCART SOLUTIONS, LLC**

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, as the same may from time to time be amended (the "Act").

ARTICLE I - NAME

The name of this limited liability company (the "Company") is **Maycart Solutions**.

ARTICLE II - ADDRESS

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

Principal Office Address:

Tracy A. Matthews
9378 Arlington Expressway-349
Jacksonville, FL 32225

Mailing Address:

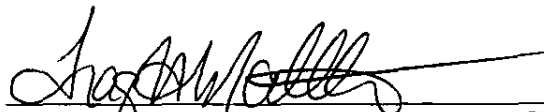
Tracy A. Matthews
9378 Arlington Expressway-349
Jacksonville, FL 32225

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

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

Tracy A. Matthews
9378 Arlington Expressway-349
Jacksonville, FL 32218

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 certification. 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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

EFFECTIVE DATE 1/29/10

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TALLAHASSEE, FLORIDA

ARTICLE IV – MANAGER(S) OR MANAGING MEMBER(S):

The name and address of each Manager or Managing Member is as follows:

Title:

MGRM

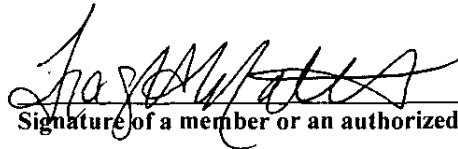
Name and Address:

Tracy A. Matthews
Maycart Solutions, LLC
9378 Arlington Expressway-349
Jacksonville, FL 32225

ARTICLE V – EFFECTIVE DATE

Effective date, if other than the date of filing: January 29th, 2010.
(OPTIONAL) (If an effective date is listed, the date must be specified and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

FILED
10 FEB -2 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Tracy A. Matthews

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fees for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)