

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

**L10000037184  
FILED 8:00 AM  
April 06, 2010  
Sec. Of State  
clewis**

**Article I**

The name of the Limited Liability Company is:  
COASTAL PAYMENT SOLUTIONS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
8451 GATE PARKWAY WEST  
APT. 1225  
JACKSONVILLE, FL. US 32216

The mailing address of the Limited Liability Company is:  
8451 GATE PARKWAY WEST  
APT. 1225  
JACKSONVILLE, FL. US 32216

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
CRYSTAL HENDERSON  
8451 GATE PARKWAY WEST  
APT. 1225  
JACKSONVILLE, FL. 32216

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.

Registered Agent Signature: CRYSTAL HENDERSON

## **Article V**

The name and address of managing members/managers are:

Title: MGRM  
CRYSTAL HENDERSON  
8451 GATE PARKWAY WEST  
JACKSONVILLE, FL. 32216 US

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Signature of member or an authorized representative of a member

Signature: CRYSTAL HENDERSON