Division of Corporations Electronic Filing Cover Sheet

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From:

Account Name : CSH SERVICES, LLC

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Fax Number

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FLORIDA LIMITED LIABILITY CO.

Lisa Leitzinger, LLC

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608 and/or 621,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

LISA LEITZINGER, LLC

ARTICLE II ADDRESS

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

401 COUNTRY COTTAGE LANE WINTER GARDEN, FLORIDA 34787

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agentare:

LISA MOIR LEITZINGER 401 COUNTRY COTTAGE LANE WINTER GARDEN, FLORIDA 34787

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.

LISA MOIR LEITZINGER / Registered Agent's signature

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LISA LEITZINGER, LLC

ARTICLE IV MANAGEMENT

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

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
LISA MOIR LEITZINGER
401 COUNTRY COTTAGE LANE
WINTER GARDEN, FLORIDA 34787

2010 APR 21 AM 8: 10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

LISA MOIR LEITZINGER