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A1a Incorporation

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**Florida Department of State**  
**Division of Corporations**  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.**

**David Shannon L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

G. MCLEOD

APR 30 2010

EXAMINER

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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:

DAVID SHANNON L.L.C.

**ARTICLE II      ADDRESS**

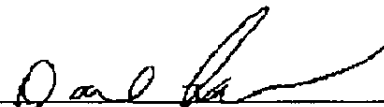
The mailing address and street address of the principal office of the Limited Liability Company is:

9908 NW 2ND CT  
PLANTATION, FLORIDA 33324**ARTICLE III      REGISTERED AGENT, REGISTERED OFFICE  
REGISTERED AGENT SIGNATURE**

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

DAVID SHANNON  
9908 NW 2ND CT  
PLANTATION, FLORIDA 33324FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
10 APR 29 AM 10:46

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.

X 

DAVID SHANNON / Registered Agent's signature

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DAVID SHANNON L.L.C.

**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)**

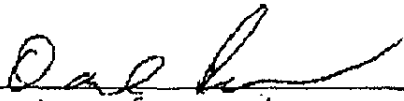
MANAGING MEMBER

DAVID SHANNON

9908 NW 2ND CT

PLANTATION, FLORIDA 33324

.....

x  \_\_\_\_\_  
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.

DAVID SHANNON