

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

L10000069772
FILED 8:00 AM
July 01, 2010
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
RESTORE YOUR ID, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
6529 HIGHCROFT DR.
NAPLES, FL. 34119

The mailing address of the Limited Liability Company is:
6529 HIGHCROFT DR.
NAPLES, FL. 34119

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:
GUY L WESSON
6529 HIGHCROFT DR.
NAPLES, FL. 34119

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: GUY L. WESSON

Article V

The name and address of managing members/managers are:

Title: MGR
GUY L WESSON
6529 HIGHCROFT DR.
NAPLES, FL. 34119

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Signature of member or an authorized representative of a member

Signature: GUY L. WESSON