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**EXAMINER**

# TROIANO & ROBERTS, P.A.

ATTORNEYS AT LAW  
317 S. TENNESSEE AVENUE  
LAKELAND, FLORIDA 33801-4617

D. A. TROIANO (1929-2005)  
CLYDE L. ROBERTS (1927-1971)

VICTOR J. TROIANO  
NICHOLAS J. TROIANO  
LAURIANE CICCARELLI

REPLY TO:  
P. O. DRAWER 829  
LAKELAND, FLORIDA 33802-0829  
TELEPHONE (863) 686-7138  
FAX (863) 686-9157  
WEBSITE: WWW.TROIANOLAW.COM

October 25, 2010

DELIVERY VIA FEDERAL EXPRESS

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Pilot Consulting, LLC  
Our file: B100075

Dear Sir or Madam:

Enclosed with this letter please find the following:

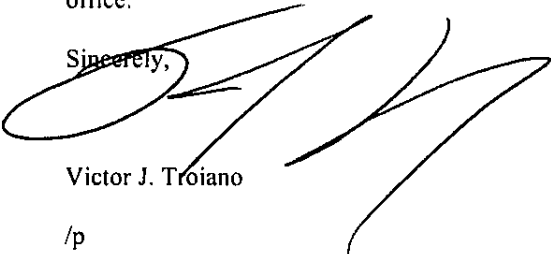
1. Articles of Organization.
2. Check in the amount of \$155.00, representing filing fee, registered agent fee, and one (1) certified copy of the Articles of Organization.

Please assist us by properly filing this new limited liability company with the State of Florida. Please furnish our office with one certified copy of the Articles of Organization.

We are furnishing you with a prepaid FEDX mailer to expedite this matter. Please use said FEDX mailer for the return of the certified document.

Thank you for your assistance in this matter. Should you have questions or comments, please contact our office.

Sincerely,

  
Victor J. Troiano

/p  
Enclosures  
cc: Michael J. Gardyasz

**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The Name of the Limited Liability Company is: Pilot Consulting, LLC

**ARTICLE II – Address:**

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

a: Mailing Address: P. O. Box 406, Lakeland, FL 33802-0406

b: Street Address: 100 Wyndham Drive, Winter Haven, FL 33884

**ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:**

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

Michael J. Gardyas

Name

100 Wyndham Drive

Florida street address (Post Office Box **NOT** acceptable)

Winter Haven, Florida 33884

City, State and Zip

*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 as provided for in Chapter 608, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature

**ARTICLE IV – Management (Check applicable box)**

The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company.

The Limited Liability Company is to be managed by one member or members and is, therefore, member - managed company.

\_\_\_\_\_  
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.)

  
\_\_\_\_\_  
Michael J. Gardyas

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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