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Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : CSH SERVICES, LLC
Account Number : 120070000160
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FLORIDA LIMITED LIABILITY CO.

Premiere Tax Services LLC

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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:

PREMIERE TAX SERVICES LLC

ARTICLE II ADDRESS

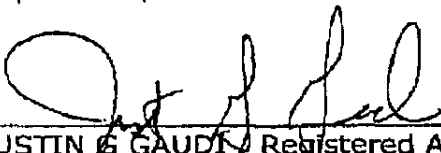
The mailing address and street address of the principal office of the Limited Liability Company is:

5510 W COLONIAL STE 104
ORLANDO, FLORIDA 32808**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

JUSTIN G GAUDI
5510 W COLONIAL STE 104
ORLANDO, FLORIDA 32808

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 

JUSTIN G GAUDI Registered Agent's signature

H10000243852 3

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H10000243852 3

PAGE 2

PREMIERE TAX SERVICES 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)

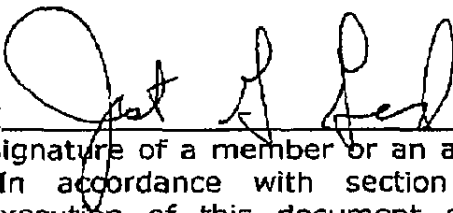
MANAGING MEMBER

JUSTIN G GAUDI

5510 W COLONIAL STE 104

ORLANDO, FLORIDA 32808

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TALLAHASSEE, FLORIDA

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.

JUSTIN G GAUDI

H10000243852 3