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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 : 12C070000160
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.
PRECISION SPECIALTY SERVICES LLC**

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

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

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

PRECISION SPECIALTY SERVICES LLC

ARTICLE II ADDRESS

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

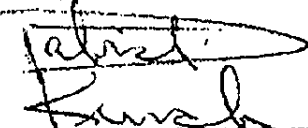
161 EDGEWATER CIRCLE
SANFORD, FLORIDA 32773

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

PATRICK ANTHONY KREUSCH
161 EDGEWATER CIRCLE
SANFORD, FLORIDA 32773

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 

PATRICK ANTHONY KREUSCH / Registered Agent's signature

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PAGE 2 PRECISION SPECIALTY SERVICES LLC

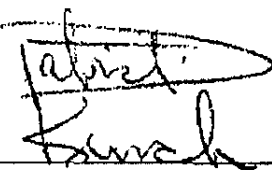
ARTICLE IV MANAGEMENT

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
PATRICK ANTHONY KREUSCH
161 EDGEWATER CIRCLE
SANFORD, FLORIDA 32773

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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.

PATRICK ANTHONY KREUSCH

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