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COVER LETTER

TO:	Registration Sect Division of Corpo					
SUBJI	rcr. Interlace	ed Technology	Solutions			
Name of Limited Liability Company						
The en	closed Articles of O	rganization and fee(s) are	submitted for filing.			
Please	return all correspond	dence concerning this mat	ter to the following:			
	Jill Wisnes	ki				
	Name of Person					
	Firm/Company					
3 Flametree Court						
			Address			
Palm Coast, FL 32137						
City/State and Zip Code Mike & Light VILW. Com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Jill Wisneski _{at (} 386 ₎ 4473896						
	Name of F	Person	Area Code & Daytime Telep	hone Number		
Enclo	sed is a check for t	he following amount:				
\$125.00	O Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company	y is:	
Interlaced Technology Solu	itions, LLC.	
	Unbility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	he principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
3 FlameTree Court	3 Flametree Court	
Palm Coast FL 32137	Paim Coast FL 32137	
3 Flametree C	Registered Agent. You must designate an indi- the registered agent are:	's Signature: Vidual or Mount of ALL ANA SSEE FLORISS.
Ci	ity, State, and Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d in this certificate, I hereby accept pacity. I further agree to comply wi ete performance of my duties, and I i	the apprintment as th the provisions of all am familar with and

(CONTINUED)

Page 1 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)