Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000013794 3)))



H110000137943ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : BUSINESS FILINGS

Account Number : 105256001620 Phone : (608)827-5300 Fax Number : (608)827-5501

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: cliff.anders@itcentricity.com

FLORIDA LIMITED LIABILITY CO. IT Centricity LLC

MELCEIVED
11 JAN 18 AM 6: 56
SECRETARY OF STATE
ALLAHASSFE, FLORDA

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

FILED

11 JAN 18 AM 8: 13

SECRETARY OF STATE
FALLAHASSEF, FIORING

Electronic Filing Menu

Corporate Filing Menu

Help

J. BRYAN

JAN 1 9 2011.

EXAMINER

FAX AUDIT # H11000013794 3

ARTICLES OF ORGANIZATION OF IT Centricity LLC

ARTICLE I

NAME

The name of the limited liability company shall be: IT Centricity LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 3777 NE 163rd St # 110, North Miami Beach, Florida 33160.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Joseph Anders, 1956-J University Blvd S Suite 248, Mobile, Alabama 36609

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,

Date: January 17, 2011

WI 53717

608-827-5300

Marel

FAX AUDIT # H11000013794 3

FAX AUDIT # H11000013794 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: IT Centricity LLC

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Mark Williams, A.V.P. Business Filings Incorporated

Mull

Date: January 17, 2011

FILE IS

11 JAN 18 AN 8: 13

SECRETARY OF STATE
VALLAHASSEE, FLORIDA