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NAME:

J.D. CASCIO CONSULTING ASSOCIATES LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

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AUTHORIZATION: ABBIE/PAUL H

COVER LETTER

то:	Registration ! Division of Co		•	
SUBJI	ECT: J.D. CAS	CIO CONSULTING ASSOCI		
		Name of Limit	ed Liability Company	
The en	aclosed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	pondence concerning this mat	ter to the following:	
			Name of Person	
			Firm/Company	
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For fur	rther information	concerning this matter, please	e call:	
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Enclos	sed is a check for	or the following amount:		
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee Certificate of Statu Certified Copy (additional copy is enclosed)	is &
		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 Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

J.D. CASCIO CONSULTING ASSOCIATES, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
5373 SW 34TH WAY,	SAME
FT. LAUDERDALE, FLORIDA 33312-5537	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JOSEPH D. CASCIO	
N	ame
5373 SW 34TH WAY,	
Plorida stree	t address (P.O. Box NOT acceptable)
FT. LAUDERDALE	FL 33312-5537
Cit	y, 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 (REQUIRED)

JOSEPH D. CASCIO

(CONTINUED)

Page 1 of 2

FLOTE AMOUZOIO C'T Byshim Calling

Title: "MGR" = Man "MGRM" = Man	Name and Address: ager anaging Member	
MORM	JOSEPH D. CASCIO	
	5373 SW 34TH WAY,	<u>-</u> -
	FT. LAUDERDALE, FLORIDA 33312-5537	
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Page 2 of 2

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\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent

1 30.00 Certified Copy (Optional)

5.00 Certificate of Status (Optional)