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(Re	equestor's Name)		_
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PICK-UP	☐ WAIT	MAIL	
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(Do	cument Number)		_
Certified Copies	_ Certificates	of Status	_
Special Instructions to	Filing Officer:		7
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EFFECTIVE DATE 5 13 2011

B. KOHR MAY 1 0 2011

EXAMINER

DIVISION OF CORPORATION

11 MAY -9 AM 9: 58

COVER LETTER

V.

TO: Registration Division of C	Section Corporations		
SUBJECT: Fore	nsic Consulting Se	ervices, LLC	DIVISAR 14 DIVISAR
	Name of Limite	d Liability Company	美
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.	ONSON OF COMPONIES
Please return all corre	spondence concerning this matte	er to the following:	بر محر ب
Joseph	D. Thomas		
		Name of Person EFFECTIVE D	ATE 5/13/2011
Forensio	Consulting Service		
		Firm/Company	
5427 Sa	iltamonte Dr.		
· · · · · · · · · · · · · · · · · · ·		Address	
New Port	Richey, FL 34655		
	•	//State and Zip Code	
cnjdthoma	s@aol.com E-mail address: (to be used for	or future annual report notification)	
For further information	n concerning this matter, please		
Joseph D. Thor	mas	at (727) 967-7907	
Nam	ne of Person	Area Code & Daytime Telephone Num	ber
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certified Certified Copy is enclosed)	Filing Fee, ate of Status & d Copy al 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 Circle Tallahassee, FL 32301	

EFFECTIVE DATE 5/13/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Forensic Consulting Services, 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:	Maining Address:
5427 Saltamonte Dr.	5427 Saltamonte Dr.
New Port Richey, FL 34655	New Port Richey, FL 34655

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. Thomas	
Nan	ne
5427 Saltamont	e Dr.
Florida street a	address (P.O. Box NOT acceptable)
New Port Richey	_{FL} 34655
City,	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..

Yegistered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

100 S 30

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	ıber
MGR	Joseph D. Thomas
	5427 Saltamonte Dr.
	New Port Richey, FL 34655
(Use attachment if necessary	/)
	(OPTIO)
	r than the date of filing: 05/13/2011 (OPTION te must be specific and cannot be more than five business d
0 days after the date of filing	

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Joseph D. Thomas

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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