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Office Use Only

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SECRETARY OF STATE

T. HAMPTON

SEP 1 # 2011

EXAMINER

COVER LETTER

Registration Section
Division of Corporations

SUBJE	Consult America	a LLC.
	Name of Limited Liability Co	ompany
The enc	closed Articles of Organization and fee(s) are submitted for f	filing.
Please r	return all correspondence concerning this matter to the follow	wing:
	Jason Th	nedv
-	Name of Person	
	Consult Ameri	ica LLC.
	Firm/Company	/
	9556 Brimto	n Drive
	Address	
	Orlando / Flor	rida 32817
	City/State and Zip	
	thedy55@ho	
	E-mail address: (to be used for future annual	report notification)
KFor furt	ther information concerning this matter, please call:	
Ja:	son Thedy at 321	356-5480
	Name of Person Area (Code & Daytime Telephone Number
	sed is a check for the following amount:	
_3125 .00	Filing Fee \$\\$130.00 Filing Fee \& _\$155.00 Filing Fee \& Certificate of Status	Filing Fee & \sum \$160.00 Filing Fee, Copy Certificate of Status &
		copy is enclosed) Certified Copy (additional copy is enclosed)
		(auditional copy is enclosed)
	Mailing Address Stree	et/Courier Address
		stration Section sion of Corporations
	P.O. Box 6327 Clifto	on Building
	·	Executive Center Circle thassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	ICI	.E.	I - 1	Van	ne:

The name of the Limited Liability Company is:

Consult America 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:

9556 Brimton Drive
Orlando, Florida ,32817

USA.

9556 Brimton Drive Orlando, Florida 32817 USA.

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:

Nashwan ALYousif

Name

701 Tobie Court

Florida street address (P.O. Box NOT acceptable)

Orlando/ Florida

... 32825

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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE

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

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

<u>.</u>

(OPTIONAL)
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ument
are true. of State
1

Page 2 of 2

25.00 Filing Fee for Articles of Organization and Designation of Registered Agent

30.00 Certified Copy (Optional) 25.00 Certificate of Status (Optional)

Filing Fees: