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EXAMINER
JAN 18 2012

COVER LETTER

TO: '	Registration Section Division of Corporations
SUBJE	Tru Virtual Solutions, LLC
SULVE	Name of Limited Liability Company
The end	osed Articles of Organization and fee(s) are submitted for filing.
Please i	cturn all correspondence concerning this matter to the following:
-	Malinda Truog
	Name of Person
	Tru Virtual Solutions, LLC
	Firm/Company
	14654 Bensbrook Drive
	Address
9	pring Hill, FL 34609
•	City/State and Zip Code
_	ATruog@gmail.com E-mail address: (to be used for future annual report notification)
For furt	ner information concerning this matter, please call:
Malin	da Truog at (352`) 263-3693
	Name of Person Area Code & Daytime Telephone Number
Enclos	d is a check for the following amount:
\$125.00	Filing Fee \$\sqrt{\$130.00}\$ Filing Fee & \$\sqrt{\$155.00}\$ Filing Fee & \$\sqrt{\$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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	any is:	
Tru Virtual Solutions, LLC		
(Must end with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Cor	mpany is:
Principal Office Address:	Mailing Address:	• •
14654 Bensbrook Dr.	14654 Bensbrook Dr.	
Spring Hill, FL 34609	Spring Hill, FL 34609	
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Agent's Signatur on Registered Agent. You must designate an individual or anoth	er
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	istered Office, & Registered Agent's Signatur on Registered Agent. You must designate an individual or anoth	er
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Agent's Signatur on Registered Agent. You must designate an individual or anoth	er
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	istered Office, & Registered Agent's Signatur on Registered Agent. You must designate an individual or anoth	er
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Malinda Truog 14654 Bensb	istered Office, & Registered Agent's Signatur on Registered Agent. You must designate an individual or anoth	er
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Malinda Truog 14654 Bensb	istered Office, & Registered Agent's Signatur on Registered Agent. You must designate an individual or anoth	12 J

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)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
WORW — Wastaging Weineer	
MGR	Mafinda Truog
	14654 Bensbrook Dr.
	Spring Hill, FL 34609
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(Use attachment if necessary)	
OFF V. Effective data if other than	the date of filing: (OPTIONAL
Tective date is listed the date mu	st be specific and cannot be more than five business days
	se be specific and control of more such are business any
l) days after the date of filing.)	
U days after the date of filing.)	
U days after the date of filing.)	
0 days after the date of filing.) REQUIRED SIGNATURE:	
	alinda Jul D3- ember or an authorized representative of a member.

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.)

Malinda Truog

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)