

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L12000026370
FILED 8:00 AM
February 23, 2012
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:

CLAIM ASSURANCE, LLC

Article II

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

625 WEST 18TH STREET
HIALEAH, FL. US 33010

The mailing address of the Limited Liability Company is:

625 WEST 18TH STREET
HIALEAH, FL. US 33010

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

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

WILLIAM J GROSS ESQ.
C/O TRIPP SCOTT, P.A.
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE, FL. 33301

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.

Registered Agent Signature: WILLIAM J. GROSS, ESQ.

Article V

The name and address of managing members/managers are:

Title: MGR
ANTHONY J FERRO
2819 SILVER SPRINGS COURT
MURFREESBORO, TN. 37128 US

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Signature of member or an authorized representative of a member

Electronic Signature: WILLIAM J. GROSS, ESQ.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

FEB. 8, 2012 2:00PM

PORTIO - NEW YORK

NO. 638 P. 1

L12000026370

CLAIM ASSURANCE INCORPORATED
2819 SILVER SPRINGS COURT
MURFREESBORO, TN 37128

February 23, 2012

VIA FACSIMILE - 850-245-6030

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Attn: Joey Bryan

Re: Document Number: W12000010529
Entity Name : Claim Assurance, LLC
Tracking Number: 600222725576
Pin Number: 5576

Dear Mr. Bryan,

I am the incorporator and CEO of Claim Assurance Incorporated, Document Number P12000017425. On February 22, 2012, I filed Articles of Dissolution for this entity. I do not intend to revoke this dissolution and hereby release the name to be used by Claim Assurance, LLC as referenced above.

Very truly yours,


Anthony J. Ferro

Sworn to and subscribed before me
this 23rd day of February, 2012


Notary Public

LINDA CUMMINGS
Notary Public, State of New York
No. 01CU4825801
Qualified in New York County
Commission Expires March 30, 2014