

May 15 12 00:36a

L12000065959

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000131115 3)))



H120001311153ABCP

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CSH SERVICES, LLC
Account Number : 120070000160
Phone : (800)494-3124
Fax Number : (561)455-9885

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

FILED
2012 MAY 15 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
12 MAY 15 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
NORCIN Consulting LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

A. LUNT

MAY 16 2011

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H12000131115 3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

FILED
2012 MAY 15 AM 10:12
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the Limited Liability Company is:

NORCIN CONSULTING LLC

ARTICLE II ADDRESS

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

5846 NW BATES AVENUE
PORT ST LUCIE, FLORIDA 34986

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

MERCY CINTRON
5846 NW BATES AVENUE
PORT ST LUCIE, FLORIDA 34986

Having been named as registered agent 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.

x Mercy Cintron
MERCY CINTRON / Registered Agent's signature

H12000131115 3

H12000131115 3

PAGE 2 NORCIN CONSULTING LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS

MANAGING MEMBER

NORBERTO R CINTRON

5846 NW BATES AVENUE

PORT ST LUCIE, FLORIDA 34986

MANAGING MEMBER

MERCY CINTRON

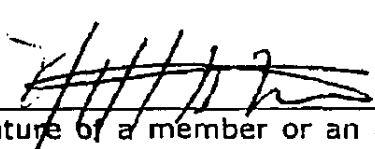
5846 NW BATES AVENUE

PORT ST LUCIE, FLORIDA 34986

FILED
2012 MAY 15 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

.....

X


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.

NORBERTO R CINTRON

H12000131115 3