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(Re	questor's Name)			
(Address)				
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Name	e)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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K.SALY EXAMINER FEB 1 2 2013

COVER LETTER

TO: Registration Se Division of Con			
SUBJECT: AMER	ican Class Act	ion Services L.L	. C.
		ed Liability Company	
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please return all correspo	ondence concerning this matt	er to the following:	
	Benny W. 1	Davis, Jr.	
Amer		action Services	L.L.C.
289	Bell Branc	Firm/Company h LANC	
	ksonuille, l	Address	
ber		y/State and Zip Code Oior)M
For further information of	oncerning this matter, please	•	
Benny W.	DAVIS, Jr	at (904), 540 - 3	3968 none Number
Enclosed is a check fo	r the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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 Ci	rcle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	EFFECTIVE DATE			
American Class Action	Services L.L.C.			
(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:			
289 Bell Branch Lane Jacksonuille, FL 32259	289 Bell Branch Lane Jacksonville, FL 32259			
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 re				
Benny W. DAV	is. Jr · · · · · · · · · · · · · · · · · ·			
Name				
289 Bell Branc	h Lave			
Florida street address (P.O. Box NOT acceptable)				
Jacksonuille	FL 32259			
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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Benny W. Davis Jr	
	289 Bell Branch LANE JACKSONUILLE, FL 32259	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: February 11, 2013 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized epresentative 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.)

constitutes a third degree felony as provided for in s.817.155, F.S.)

Benry W. Davis, Jr

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)