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SECRETARY OF STATE

1'0V 2 1 2013

T. HAMPTON

COVER LETTER

TO:

Registration Section Division of Corporations

NAT INFO SOLUTIONS LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please

Please return all corresp	ondence concerning this matt	er to the following	g:	
W Thus	hara Abhaya	wardhan	ne	
**************************************		Name of Person		the state of the s
		Firm/Company		******************************
7306 Ka	auai Loop #3/	4		
		Address		
New Po	ort Richey FL	34653		
		y/State and Zip Cod	ie	
abthushar	a@gmail.com			
	E-mail address: (to be used t	for future annual rep	ort notification)	
For further information	concerning this matter, please	call:		
W Thushara	Abhayawardhane	e at (727	236-0	151
	of Person	Area Cod	le & Daytime Telep	phone Number
Enclosed is a check for	or the following amount:			
□\$125.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fili Certified Co (additional co	•	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	B# *II	54 · 44	7	

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

A DIMEGLE D. A. M.	
ARTICLE I - Name: The name of the Limited Liability Company is	
The limite of the Billion Bulletin, Company to	•
Nat Info Solutions LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
`	
ARTICLE II - Address:	
The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7306 Kauai Loop #3A	7306 Kauai Loop #3A
New Port Richey FL	New Port Richey FL
34653	34653
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	stered Agent. You must designate an individual or another
W Thushara Abhayawardhane	
Name	•
7306 Kauai Loop #3A	
Florida street ad	idress (P.O. Box NOT acceptable)
New Port Richey	_{FL} 34653
City, S	tate, and Zip
liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and comple	accept service of process for the above stated limited this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of the performance of my duties, and I am familiar with egistered agent as provided for in Chapter 608, F.S
Registered Agent's Signa	 ature (REQUIRED)
i () i	
(CONTIN	VUED) TALLL SEC. 2013

Page 1 of 2

SECRETARY OF STATE ASSEE. FLORIDA

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	
MGR	W Thushara Abhayawardhane
	7306 Kauai Loop #3A New Port Richey Ft. 34653
	New Folt Ridley Ft. 34055
- * · · · · · · · · · · · · · · · · · · 	
	
LE V: Effective date, if other than	n the date of filing: (OPTIO
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