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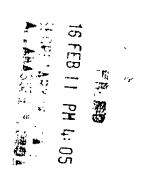
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COVER LETTER

	egistration Section vision of Corporations	ži				
SUBJECT	Knight Investigations & Security					
SOBJECT	Name of Limited Liability Company					
The enclose	ed Articles of Organization and fee(s) are submitted for filing.				
Please retur	n all correspondence concerning thi	s matter to the following:				
	Alex Wright					
		Name of Person				
	Knight Investigations & Security S	olutions				
		Firm/Company				
	677 Valencia Place Circle					
		Address				
	Orlando, Florida 32825					
-	Knightissolution E-mail address: (to be	City/State and Zip Code 5 C 2 mail - comp used for future annual report notification)				
For further in	nformation concerning this matter, p	lease call:				
	Alex Wright a	321 228-3671 t ()				
	Name of Person	Area Code Daytime Telephone Number				
Enclosed is	a check for the following amount:					
\$125.00 Fi	ling Fee \$130.00 Filing Fee Certificate of Status					
	Mailing Address New Filing Section	Street Address New Filing Section				
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Vainht Investigation & Counity Coloring III C	
Knight Investigations & Security Solutions LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of t Principal Office Address:	he Limited Liability Company is: Mailing Address:
677 Valencia Place Circle, Orlando, FL. 32825	677 Valencia Place Circle, Orlando, Fl. 3282
ARTICLE III - Registered Agent, Registered Office, & Regis	tered 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 registered agent are:

Alex Wright		
	Name	
677 Valencia Place (Circle	
Florida street addres	s (P.O. Box NOT a	cceptable)
Orlando, Florida 328	25	
City	State	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2



11 % A	tle: .MBR" = Authorized	Member	Name and Address:	
	IGR" = Manager			
AN	AMBR		Alex Wright	
			677 Valencia Place Circle	
			Orlando, Fl. 32825	
_			<u> </u>	
(U	(Use attachment if necessary)	ssary)		
TICLE	V: Effective date, if o	ther than the date of filing	: (OPTIONAL)	
an effecti date of f		date must be specific an	d cannot be more than five business days prior to or 90 days after	
			applicable statutory filing requirements, this date will not be listed	
	nt's effective date on	the Department of State'	s records.	
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docume	VI: Other provisions,			

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Alex Wright