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To: Division of Corporations
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From: Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407)843-4600
Fax Number : (407)377-6544
Att: *Tami Passley*

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

Email Address: *pete@dbatorlando.com*

FLORIDA LIMITED LIABILITY CO. Full Count Orlando LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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CORPORATIONS
STATE OF FLORIDA

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7-31

**ARTICLES OF ORGANIZATION
OF
FULL COUNT ORLANDO LLC**

ARTICLE I - NAME

The name of this limited liability company is FULL COUNT ORLANDO LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 10060 Bucklow Hill Drive, Orlando, Florida 32832.

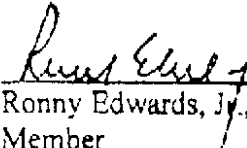
ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 N. Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company is Ronny Edwards, Jr.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company and the initial manager of the Company is Peter DeSimone, 10060 Bucklow Hill Drive, Orlando, Florida 32832.

9/24/11

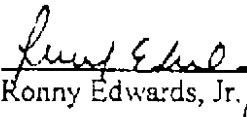


Ronny Edwards, Jr., Authorized Representative of
Member

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

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Ronny Edwards, Jr.