AZ Corp. Commission
02227850

AZ CORPORATION COMMISSION
FILED
NOV 0 2 2007
FILE NO. P13601069

AZ CORPORATION COMMISSION
FILED
JUL 3 0 2007
FILE NO. L13601069

AZ CORPORATION COMMISSION
FILED
SEP 2 5 2007

DO NOT WRITE ABOVE THIS LINE, FOR ACC USE ONLY

ARTICLES OF ORGANIZATION

FILE NO. L13601069

Select one. This form may be used for:

☐ **ARIZONA LIMITED LIABILITY COMPANY (A.R.S. §29-632)**

☒ **ARIZONA PROFESSIONAL LIMITED LIABILITY COMPANY (A.R.S. §29-641.01)**

DO NOT PUBLISH THIS SECTION
NOTE: A professional limited liability company is an LLC organized for the purpose of rendering one or more categories of professional service. Professional service is defined as a service that may be lawfully rendered only by a person licensed in this state to render the service.

1. The LLC name must contain the words "limited liability company or "limited company" or the abbreviations "L.L.C.", "L.C.", "LLC", or "LC". The Professional LLC name must contain the words "professional limited liability company or the abbreviations "P.L.L.C.", "P.L.C.", "PLLC", or "PLC."

2. Must be an Arizona address. DO NOT LEAVE THIS SECTION BLANK

3. If the statutory agent has a PO BOX then they must also provide a physical address or description of the location.

The agent must sign the articles or provide written consent to acceptance of the appointment.

1. The name of the organization:

A. _____
LLC Name Reservation File Number (If one has been obtained). If not, leave this line blank

B. USBDA PI INVESTIGATIONS PLLC
Limited Liability Company Name

2. Known place of business in Arizona (If address is the same as the street address of the statutory agent, write "same as statutory agent". DO NOT LEAVE THIS SECTION BLANK)

Address 10235 N. Turquoise Moon Way VOISE

City TUCSON State AZ Zip 85743

3. The name and street address of the statutory agent in Arizona

Name Clifford Parker

Address 10235 N. Turquoise Moon Way VOISE

City TUCSON State AZ Zip 85743

Acceptance of Appointment by Statutory Agent:

I CLIFFORD PARKER, having been designated to act as
(Print Name of the Statutory Agent)
Statutory Agent, hereby consent to act in that capacity until removed or resignation is submitted in accordance with the Arizona Revised Statute.

Agent Signature: Clifford Parker

If signing on behalf of a company, please print the company name here.

AZ CORPORATION COMMISSION
FILED
NOV 0 8 2007

LL:0004
Rev: 10/2006

FILE NO. P-13601069

DO NOT PUBLISH THIS SECTION
4. Only required for professional limited liability company. The purpose must state the professional service or services that the company is organized to perform. Professional service is defined as a service that may be lawfully rendered only by a person licensed in this state to render the service.

5. The latest date, if any, on which the Company must dissolve.
If a dissolution date should include the month, day and year. *Perpetual means continuing forever or indefinitely*

6. Check which management structure will be applicable to your company. Provide name, title and address for each person.

6A. If reserved to the member(s), check the member's box and provide the name(s) and address(es) of each member. NOTE: If reserved to the member(s) you cannot list any manager.

6B. If vested in manager(s) check the manager's box and provide the name(s) and address(es) of each manager and each member who owns a twenty (20%) percent or greater interest in the capital or profits of the LLC/ PLLC.

The person (s) executing this document need not be a manager or member of the company.

Your phone and fax are optional.

LL:0004
Rev: 102006

4. **Purpose of this (Professional) Limited Liability Company is to provide the following (professional) service(s): (Only required for a Professional LLC Company)**

PRIVATE INVESTIGATOR

5. **Dissolution:** The latest date of Dissolution

☐ The latest date to dissolve __/__/____ (Please enter month, day and four digit year)

☐ The Limited Liability Company is Perpetual

6. **Management Structure:** (Check one box only) A.R.S. §29-632(5)

A. ☐ RESERVED TO THE MEMBER(S)
IF RESERVED TO THE MEMBER(S), YOU MAY SELECT ONLY THE MEMBER BOX FOR EACH MEMBER LISTED.

B. ☐ VESTED IN MANAGER(S)
IF VESTED IN THE MANAGER(S), AT LEAST ONE ENTRY BELOW MUST HAVE THE MANAGER BOX CHECKED.

Name Joseph WEBSTER — Name Richard RIGBY

☐ Member ☒ Manager (only if "B" is selected above) — ☒ Member ☐ Manager (only if "B" is selected above)

Address: 10235 N. TORNADO — Address: 3202 DETROIT AVE

City, TUCSON State, AZ Zip: 85743 — City, PascAgoula State, MS Zip: 39581

Name PETER PARKER — Name TONY HARRISON

☐ Member ☒ Manager (only if "B" is selected above) — ☐ Member ☒ Manager (only if "B" is selected above)

Address: PO. BOX 8458 — Address: 9803 GOOD LUCK RD APT 1

City, LIC State, NY Zip: 11101 — City, SEABROOK State, MD Zip: 20706

IF YOU NEED MORE SPACE FOR LISTING MEMBERS / MANAGERS PLEASE ATTACH THE ADDITIONAL PAGE TO THE ARTICLES OF ORGANIZATION.

Executed this 10 day of 30 / 2007

Executed by: Clifford Parker — Print Name CLIFFORD PARKER

If signing on behalf of a company, please print the company name here.

Phone Number (212) 518-6218 Fax Number (718) 424-5943

ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION
SUBMISSION COVER SHEET

Important: USE A SEPARATE COVER sheet for each document.
Are you filing: ☑ New Entity ☐ Change to existing Entity ☐ Re submission/Correction

Please Select AND Complete all the Appropriate Sections 1 through 10:
Regarding (Name/Proposed name for Corp/LLC):

1. Type In Name: _____

2. Filing Type: (Select Only One)

☐ Articles of Domestication	$100.00
☐ Articles of Incorporation (P)	$ 60.00
☐ Articles of Incorporation (NP)	$ 45.00
☑ Articles of Organization	$ 50.00
☐ Application For Authority (Business)	$175.00
☐ Application to Conduct Affairs (NP)	$175.00
☐ Application for New Authority	$175.00
☐ Application for Registration	$150.00
☐ Articles of Amendment	$ 25.00
☐ Articles of Amendment & Restatement	$ 25.00
☐ Articles of Correction	$ 25.00
☐ Articles of Merger/Share Exchange	$100.00
☐ Affidavit of Publication	No Fee
☐ Other: _____	

3. Extras:
- ☐ Certified Copies (___) Qty @ $5 each for Corps
- ☐ Certified Copies (___) Qty @ $10 each for LLCs
- ☐ Good Standing Certificate (___) Qty @ $10 ea.)
- ☐ Expedite Good Standing ($30.00 extra)
- ☐ Expedite Certified Copies ($25.00 extra)

4. Processing Type (Select One)
- ☐ Expedited ($25.00) (Priority service. Additional Fee Per Document) Completed as soon as possible. View current processing times at http://corporations.azcc.gov
- ☐ Regular View current processing times at http://corporations.azcc.gov

5. Select Payment type:
- ☐ Check Amt _____ Check # _____
- ☐ Cash Amt _____
- ☐ MOD Amt _____ MOD # _____
- ☐ No fee required
- ☐ See attached distribution of funds instructions

RECEIVED
SEP 25 2007
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

6. Total Payment Type: $ 0.00

RECEIVED
JUL 30 2007
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

7. Other Special Instructions: _____

RECEIVED
JUL 30 2007
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

8. SELECT ONE RETURN DELIVERY OPTION :
☒ Mail ☐ Pick Up ☐ Fax # _____

RECEIVED
NOV 02 2007
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

9. The following individual should be called to pick up completed documents:

[redacted]

Name/Service Co. _____ Phone: _____

10. Please respond promptly to phone messages. Documents will be mailed if they are not picked up in a timely manner - approximately two weeks. In that event, the documents should be mailed to the following address:

Firm Name: USBDA. PI INVESTIGATORS LLC Attn: CLIFFORD PARKER
Address: P.O. BOX 6452
City, State, Zip: LIC NY. 11101 (212) 518-6218