JIVISION

JIVISION OF CORPORATION

# Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

11/26 PLLIC

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000230928 2)))

MJM

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

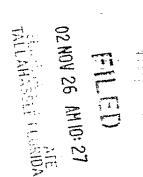
Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

## LIMITED LIABILITY COMPANY

technicell, llc

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	S155.00



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Technice 11, LLC

EMPIRE CORP

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

8901 SW 142 Ave. Suite 6-22 , Miami, FL 33186

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

PERCY TEVADA

Name

8901 SW 192AVE, Svite 6-22, Higheri, FL 33186

Florida street address (P.O. Box NOT acceptable)

Higheri FL 33186

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 fer in Chapter 608, F.S..

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative 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.)

PERCY TELANA
Typed or printed name of signee

Filing Feet:

\$100.00 Filing Fee for Articles of Organization

5 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

# 0200023002 <del>\*</del>