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B. BOSTICK
FEB 1 8 2011
EXAMINER

COVER LETTER

	Corporations Elligent Inventory	Solutions, LLC	W and have a symbolic solution when address for the	
SUBJECT:		ed Liability Company		
The enclosed Article	es of Organization and fee(s) are	submitted for filing.		
Please return all corr	espondence concerning this matt	er to the following:		
<u>Jose G</u>	6. Gutierrez			
		Name of Person		
,		Fi. (C		
		Firm/Company		
<u>5527</u> S	Saddleback Ct.	Add	A A	
		Address	FEB	7.
Lady Lak	e, FL 32159	y/State and Zip Code		1
jggutier@	gmail.com	·		m - 5
For further informati	e-mail address: (to be used it	for future annual report notification)	AM 10: 06 OF STATE E. FLORIDA	
Jose G. Gutie	errez	at (352) 575-1856_		
Na	me of Person	Area Code & Daytime Telepho	one Number	
Enclosed is a check	k for the following amount:			
_\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed	
	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 Circ Tallahassee, FL 32301	cle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Intelligent Inventory Solutions, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Maning Address:		
5527 Saddleback Ct Lady Lake, FL 32159	5527 Saddleback Ct. Lady Lake, FL 32159		
	,		T
Margaret C.	Gutierrez		7
	Name		į į
5527 Sad	ddleback Ct.	AM 10: 06 OF STATE E. FLORIDA	Ü
Flo	orida street address (P.O. Box NOT acceptable)	701 311 90	
Lady Lake	_{FL} 32159	سد	
	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 for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member		
MGRM	Jose G. Gutierrez	
	5527 Saddleback Ct.	
	Lady Lake, FL 32159	
MGRM	Joseph D. Gutierrez	4
	3767 Cliff Crest Dr.	AL SE
	Smyrna, GA 30080	T : -
		天 [
		SS
		STAT
		 5 -3
		
(Use attachment if necessary)		
I E XI. Essentina data is athenshow	AL - J.A CCI:	(OPTIO)
	the date of filing:	
days after the date of filing.)	st be specific and cannot be more than i	ive business o
days after the date of fining.)		

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jose G. Gutierrez

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certifled Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)