11/20000011

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600280962166

TRACENCY OF TICHO

16 JAN 12 PM 4:31

16 Jan 12 am 8:50

JAN 1 3 2016 T SCHROEDER CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 850-558-1500
ACCOUNT NO. : I2000000195
REFERENCE: 943381 8078362
AUTHORIZATION :
COST LIMIT: \$ 125.00
ORDER DATE : January 5, 2016
ORDER TIME : 2:45 PM
ORDER NO. : 943381-001
CUSTOMER NO: 8078362
DOMESTIC FILING
NAME: ADDTECH, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Melissa Zender - EXT. 62956

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	[- Name:
----------------	-----------

The name of the Limited Liability Company is:

ADDTECH, 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:

2751 S. Ocean Drive	2751 S. Ocean Drive
505N	505N
Holywood, FL 33019	Holywood, FL 33019

ARTICLE III - Registered Agent, Registered Office, & Registered 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:

Principal Office Address:

Corporation Service	Company			
	Name			
1201 Hays Street				
Florida street address (P.O. Box NOT acceptable)				
Tallahassee	FL FL	32301		
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) Asst. Vice President

Mailing Address:

(CONTINUED)

Page 1 of 2

THE STATE

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-

Page 2 of 2

Typed or printed name of signce

Filing Fees:

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

ALDO PIRES FILHO

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)