

L 000000001785

ALLCOM
8910 North Dale Mabry Highway
Suite 39
Tampa, FL. 33614

2-8-2000

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL. 32314

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-02/14/00--01112--018
****125.00 ****125.00

RE: Articles of Organization For Florida LLC

Dear Sir:

Enclosed is the completed Articles of Organization For a Florida Limited Liability Company. In addition, I have enclosed payment of \$125.00 to cover the filing fee and designation of registered agent.

As per your instructions I am providing the following:

Name – Stephen T. Wagoner
Address – 8910 North Dale Mabry Highway
Suite 39
Tampa, FL. 33614
Daytime Telephone Number – 813-931-9850

If you have any questions or you require additional information, please contact me as soon as possible.

Best Regards,



Stephen T. Wagoner

FILED
00 FEB 14 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2/17

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALLCOM, LLC

ARTICLE II - Address:

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

8910 N. DALE MABRY Hwy.

SUITE 39

TAMPA, FL. 33614

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

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

Matthew A Veal

Name

355 Interstate Blvd.

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

Sarasota

FL 34240

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..

Matthew A. Veal

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)

Stephen T. Wagoner

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.)

STEPHEN T. WAGONER

Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)

FILED
00 FEB 14 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA