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April 15, 2000

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

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To Whom It May Concern:

Subject: Request for Articles of Organization for new company, TREADCOAlign, LLC

Enclosed is the application and check for Articles of Organization for Florida Limited Liability Company for the new company TREADCOAlign. Please contact myself Lester D. Newton or my assistant, Annette W. Newton if you have any questions at (407) 578-6316.

Sincerely,



David Newton
President/CEO
TREADCOAlign, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: TREADCO ALIGN, LLC

ARTICLE II - Address:

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

809 Renaissance Pointe Blvd #208

Altamonte Springs FL 32714

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

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

LESTER D. NEWTON

Name

809 Renaissance Pointe Blvd #208

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

Altamonte Springs FL 32714

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..

Lester D. Newton

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)

Lester D. Newton
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.)

Lester D. Newton

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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