

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

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.

(((H00000051090 9)))

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) 922-4003

From:

Account Name : HARPER, KYNES, GELLER

Account Number : 070651000745 Phone : (727)799-4840 Fax Number : (727)797-8206 FILED W

LIMITED LIABILITY COMPANY

FIDK, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menus

Comporate Filing

Public Access Help



H00000051090 9

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: FIDK, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 2560 Gulf to Bay Blvd., Suite 300, Clearwater, FL

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

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

	Pierre M. Vogelbacher							
	<u>2</u> 560	Gulf	tọ	Name Bay	Blvd	.,	Suite	300
_	Florida street address (P.O. Box NOT acceptable) Clearwater, FL 33765							
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..

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 Signature of a member of 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.) Pierre M. Vogelbacher

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)