

L0100000/17/17

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

000003623530-17
-02/02/01--01003--005
****125.00 ****125.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. United Diversified products, L.L.C.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time _____ ☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

RECEIVED
01 FEB - 1 PM 3:09
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

01 FEB - 1 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
UNITED DIVERSIFIED PRODUCTS, L.L.C.

ARTICLE I

NAME

The name of this limited liability company shall be:

UNITED DIVERSIFIED PRODUCTS, L.L.C.

ARTICLE II

DURATION

The period of this limited liability company's duration shall be perpetual.

ARTICLE III

PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office and mailing address of this limited liability company shall be:

7975 N.W. 154TH Street, Suite #400
Miami Lakes, FL 33016

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TALLAHASSEE, FLORIDA

ARTICLE IV

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this limited liability company is One East Broward Boulevard, Suite #1501, Fort Lauderdale, Florida 33301, and the initial registered agent of this limited liability company at that address is Peter M. Hodkin.

ARTICLE V

MANAGERS

This limited liability company shall be managed by Managers and shall have one Manager initially. The number of Managers may be increased or decreased from time to time but there shall never be less than one Manager. The name and address of the initial Manager of this limited liability company is:

Peter M. Hodkin

One E. Broward Boulevard, Suite #1501
Ft. Lauderdale, FL 33301

ARTICLE VI

CONTINUATION OF BUSINESS

The remaining members of the limited liability company may continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company.

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TALLAHASSEE, FLORIDA

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ARTICLE VII

ADDITIONAL MEMBERS

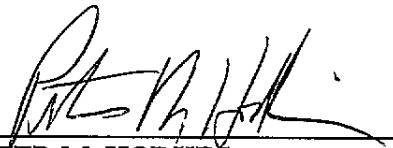
The members may admit additional members to the limited liability company from time to time and the terms and conditions of admitting additional membership are set forth in an agreement among the members on file at the limited liability company's principal office.

ARTICLE IX

INDEMNIFICATION

The limited liability company shall indemnify any Manager or former Manager, to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 30th day of January, 2001.


PETER M. HODKIN

ACCEPTANCE OF REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN ARTICLE IV OF THESE ARTICLES OF ORGANIZATION, THE UNDERSIGNED IS FAMILIAR WITH THE OBLIGATIONS OF THAT POSITION AND HEREBY AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE COMPLETE DISCHARGE OF ITS DUTIES.

FILED
JAN 31 2001
CLERK OF CIRCUIT COURT
FLORIDA

APPROVED
AND
FILED


DATED THIS 30th DAY OF JANUARY, 2001


PETER M. HODKIN

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

BEFORE ME, a Notary Public authorized in the county and state set forth above, personally appeared PETER M. HODKIN known to me and known by me to be the person who, as Member, executed the foregoing Articles of Organization of UNITED DIVERSIFIED PRODUCTS, L.L.C., and he acknowledged before me that he executed those Articles of Organization. He is personally known to me.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the county and state aforesaid this 30th day of January, 2001.


NOTARY PUBLIC
State of Florida at Large

My Commission Expires:



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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA