

LO1 0000009551

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399
CERTIFIED MAIL:

June 4, 2001

To whom it may concern:

Enclosed please find a check in the amount of \$160.00 to cover the following filling and optional fees.

- A - \$100.00 Filling Fee for Articles of Organization
- B - \$25.00 Designation of Registered Agent.
- C - \$30.00 Certified Copy.
- D - \$5.00 Certification of Status.

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-06/08/01--01084--003
***160.00 ***160.00

Thank you,

Howard Vollovick

Howard Vollovick
19451 Sheridan Street
PMB #115
Ft. Lauderdale, FL 33332
954-536-0299

FILED
01 JUN -8 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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6/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Byte-Tech Graphics LLC

ARTICLE II - Address:

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

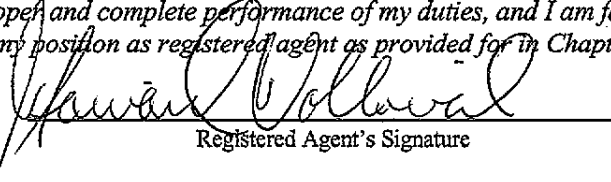
19451 Sheridan Street
PMB #115
Ft. Lauderdale, FL 33332

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

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

Howard Vollarick
Name
19451 Sheridan Street PMB #115
Florida street address (P.O. Box **NOT** acceptable)
Ft. Lauderdale FL 33332
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..


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)


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.)

Howard Vollarick

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)

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