

Requester Name

L010000/0403

Coregory Five L.C.  
3801 Coral Shores Dr.  
Ft. Lauderdale, FL 33306

Office Use Only

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

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 800004243448--2  
-05/18/01--01008--011  
\*\*\*\*125.00 \*\*\*\*125.00
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 2001-11900
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

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Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 23, 2001

CATEGORY FIVE L.C.  
3001 CORAL SHORES DR  
FT LAUDERDALE, FL 33306

SUBJECT: CATEGORY FIVE L.C.  
Ref. Number: W01000011500

We have received your document for CATEGORY FIVE L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A limited liability company may not serve as its own registered agent. Please designate an individual or an active entity, with a Florida street address. A post office box is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6043.

Shawn Logan  
Document Specialist

Letter Number: 801A00031059

# **ARTICLES OF ORGANIZATION**

## **ARTICLE I**

### **NAME**

The name of the limited liability company referred to in the following articles shall be:  
Category Five L.C.

## **ARTICLE II**

### **PRINCIPAL OFFICE**

The mailing address and the street address of the principle office of Category Five L.C. Shall be:  
3001 Coral Shores Dr.  
Ft. Lauderdale, Fl 33306

## **ARTICLE III**

### **PERIOD OF DURATION**

The period of duration for Category Five L.C. shall be:  
Perpetual, or until the members of the Company decide to terminate the Company by  
Majority vote.

## **ARTICLE IV**

### **MANAGEMENT**

Category Five L.C. is to be managed by one member and the name and address of the managing member is:

Thomas Alan Dvorak  
3001 Coral Shores Dr.  
Ft. Lauderdale, Fl 33306

## **ARTICLE V**

### **ADMISSION OF ADDITIONAL MEMBERS**

The right of the member to admit additional members and the terms and conditions of the admissions shall be:

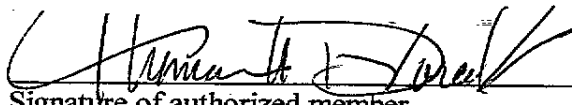
Unlimited as to who the member is and amount of initial capital contribution which such member shall be able to contribute; however the admission of a new member into Category Five L.C. and the terms and conditions of such admission must be approved by Thomas Alan Dvorak, the original founding member of Category Five L.C.

## **ARTICLE VI**

### **MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right of the remaining members of Category Five L.C. to 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 Category Five L.C. Shall be:

The same in scope as before the termination of continued membership of such member.

A handwritten signature in black ink, appearing to read "Thomas A. Dvorak", written over a horizontal line.

Signature of authorized member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

THOMAS A. DVORAK

Typed or printed name of signee

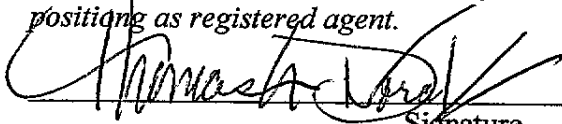
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name for the limited liability company is: Category Five L.C.
2. The name and the Florida street address of the registered agent are:

Thomas A. Dvorak  
Name  
3001 Coral Shores Dr.  
Florida Street Address  
Fort Lauderdale, FL 33306  
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.*

  
Signature