

SARAH ELURFALI

Requester's Name

6604 TIM TAM TRAIL

Address

TALLAHASSEE FL (850) 8939867

City/State/Zip Phone #

L01000013507

Office Use Only

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

1. AETechnologies (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

(Corporation Name) (Document #)

(Corporation Name) (Document #)

RECEIVED DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AUG 14 AM 9:24

NOT INTENDED TO ACKNOWLEDGE SUFFICIENCY OF FILING

SECRETARY OF STATE TALLAHASSEE, FLORIDA 01 AUG 14 AM 9:30

APPROVED AND FILED

- Mail out, Will wait, Photocopy, Certified Copy, Certificate of Status, Pick up time

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

600004533476-4 -08/14/01-01035-001 ****125.00 ****125.00

Examiner's Initials JB 8-14-01

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AETechnologies, LLC

ARTICLE II - Address:

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

6604 TIM TAM TRAIL
TALLAHASSEE, FL 32308

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

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

Spencer Ingram
Name
118 Salem Ct
Florida street address (P.O. Box **NOT** acceptable)
Tallahassee FL 32301
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..

Spencer Ingram
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)

S. Alphan
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.)

SARAH ELURKALI
Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 14, AM 9:30

APPROVED
AND
FILED

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)