## L02000002648

Tion Mateuriffe 1062 CHATHAM PINES CIR#106 WINTER SPRINGS, FL 32708

City/State/Zip

CR2E031(7/97)

Phone #

Office Use Only

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

(Corporation Name)	(Document #)
-	ALCONOMIC CONTRACTOR OF THE CO
2. (Corporation Name)	· · · · · · · · · · · · · · · · · · ·
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NEW FILINGS	A BACCIS COSS ACCIS ACCIS
THE THAT IS	<u>AMENDMENTS</u>
Profit	Amendment ()
Not for Profit	Resignation of R.A., Officer/Director
Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal
Other	Merger \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	_ 1.13.301
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
	Reinstatement
	Trademark
	Other

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
AT Your Door Computer Services, LLC		
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Con	nnany is	•
	npung so	•
1062 Chatham Pine Circle # 106		
Winter Park, FL32708		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature	e:	
The name and the Florida street address of the registered agent are:		
Tim Metcalfe		
Tim Metcalfe  1062 Chatham Pine Circle	u inc	
This made and Part War and the	#/06	
Florida street address (P.O. Box <u>NOT</u> acceptable)  Winter Pork FL 32708		
City, State, and Zip		
Having been named as registered agent and to accept service of process for the above state	ed-limite	Æ
registered agent and garge to act in this connects. I further garge to comply with the provi	sions of	$a^{\overline{E}}$
liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provisitatutes relating to the proper and complete performance of my duties, and I am familiar with the proper and complete performance of my duties, and I am familiar with the proper and complete performance of my duties, and I am familiar with the proper and complete performance of my duties.	ith and	29
accept the obligations of my position as registered agent as provided for in Chapter 608, F	~ -	_
accept the configurations of my position		
X / ~/ Mafley	07 7.S	င္မ
, Registered Agent's Signature	ATE	3: 04
Article IV - Management (Check box if applicable.)		
The Limited Liability Company is to be managed by one manager or more manager.	s 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.		
Piguature of a Mismost, of an animaryon relaterentative at a memori.		
(In accordance with section 608.408(3), Florida Statutes, the execution		
of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)		
true me areas desire and an area,		

Typed or printed name of signee

<u>Filing Fees:</u> \$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)