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Laser Photonics, LLC

FILED
02 MAY -6 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTRATION Section
Division of Corporation
P.O.Box 6327
Tallahassee, Fl. 32314

900005462749--3
-05/06/02--01079--018
***160.00 ***160.00

Please register the Limited Liability Company to transact business in Florida. The application and check are enclosed.

Thank you in advance.

Dmitri Nikitin
President



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must

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LASER PHOTONICS, LLC

ARTICLE II - Address:

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

37 SKYLINE DR. SUITE 2103, LAKE MARY, FL, 32746

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

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

DMITRI NIKITIN

Name

37 SKYLINE DR. SUITE 2103.

Florida street address (P.O. Box **NOT** acceptable)

LAKE MARY FL 32746

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.)

DMITRI NIKITIN

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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02 MAY -6 PM 1:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA