

L0300000 4689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

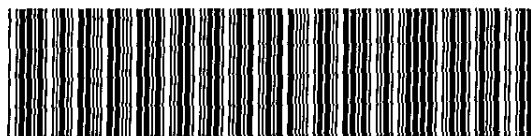
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 FEB - PM 19 38 20
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Interactor LTD. Co.

Signature _____

Requested by: SW 2/7

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- FILED
03 FEB - 7 PM 1:20
TALLAHASSEE, FLORIDA
- ____ Art of Inc. File
 - ____ LTD Partnership File
 - ____ Foreign Corp. File
 - ✓ L.C. File
 - ____ Fictitious Name File
 - ____ Trade/Service Mark
 - ____ Merger File
 - ____ Art. of Amend. File
 - ____ RA Resignation
 - ____ Dissolution / Withdrawal
 - ____ Annual Report / Reinstatement
 - ✓ Cert. Copy
 - ✓ Photo Copy
 - ✓ Certificate of Good Standing
 - ____ Certificate of Status
 - ____ Certificate of Fictitious Name
 - ____ Corp Record Search
 - ____ Officer Search
 - ____ Fictitious Search
 - ____ Fictitious Owner Search
 - ____ Vehicle Search
 - ____ Driving Record
 - ____ UCC 1 or 3 File
 - ____ UCC 11 Search
 - ____ UCC 11 Retrieval
 - ____ Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: INTERACTOR Ltd. Co.

ARTICLE II - Address:

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

4070 VENTURA AV. , MIAMI, FL. 33133

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

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

JEAN MARC FRANCOIS
Name
4070 VENTURA AV. #
Florida street address (P.O. Box NOT acceptable)
MIAMI FL 33133
City, State, and Zip

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TAMPA, FLORIDA

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.

[Signature]
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]
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.)

JEAN-MARC FRANCOIS
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)