

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	
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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY US FEB 28 AM ID: 30

ARTICLE I - Name: Laser Card, LLC The name of the Limited Liability Company is:

SECKLTARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II - Address: 2003 N. Ocean Blvd., #1604, Boca Raton, FL 33431 The mailing address and street address of the principal office of the Limited Liability Company is:

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

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

Frank Mica	<u> </u>	
Name 2003 N. Oct	ean Blvd, #1604	
Florida street address (P.O. Box NOT acceptable)		
Boca Raton	FL 33431	
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

registerea agent and agree to act in this capacity. I further agree to comply with the provisions of 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.

hank Mucal
Registered Agent's Signature

(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.)

<u>Frank Micáli</u>

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)