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4000 NW 51st ST. APT. A10 Gainesville, FL 32606-4334

(352) 374-7205

Or

(386) 365-3227

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Applied Refund Control, LLC.
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is: THE MAION NW 51 ST ST. Apt A10 Gainesville, FL 32606-4334
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Brian Phillip Caster
4000 NW SIST ST. Apt. AIO Florida street address (P.O. Box NOT acceptable)
Gainesville, FL 32606 - 4334 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.
Days F. Carle
Registered Agent's Signature
(An additional article must be added if an effective date is requested)
Bian P. Cath
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.)
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)