

L03000020800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

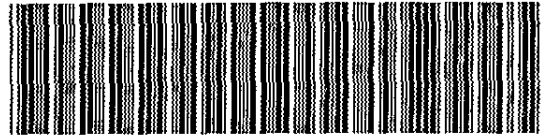
1789, 524 1122, 618, 671

Name

Office Use Only

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SEALANT
TALLAHASSEE, FLORIDA

03 JUN -9 AM 8:53

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RICHARD W. ARNOLD
DIRECT DIAL NO. (330) 458-2017
E-MAIL: rwarnold@day-ketterer.com

Day, Ketterer, Raley, Wright & Rybolt, Ltd.
Millennium Centre - Suite 300
200 Market Avenue North
P.O. Box 24213
Canton, OH 44701-4213

Telephone: (330) 455-0173
Facsimile: (330) 455-2633

May 23, 2003

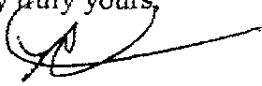
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

**RE: Articles of Organization
Registered Agent
Internet Unlimited, LLC**

Pursuant to the above, we enclose the following:

- ☐ Per your request
- ☒ For your further handling
- ☐ For your information and files
- ☐ Please examine and contact the undersigned
- ☒ If this document meets with your approval, please execute where indicated.
- ☐ Please have witnessed and/or notarized where indicated
- ☐ Please return to our office
- ☒ Please file on our behalf and return a time-stamped copy
- ☒ A check in the amount of **\$125.00** is enclosed.
- ☐ Please obtain the Judge's approval.
- ☐ Self-addressed, envelope for return.
- ☐ Please forward a receipt.
- ☐ Federal Express envelope for return.
- ☐ Certified Mail with Return Receipt
- ☐ Pleading(s) filed on this matter.
- ☐ Correspondence (sent) (received) on this matter

Very truly yours,


Richard W. Arnold

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **Internet Unlimited, LLC**

ARTICLE II - Address:

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

**1522 Saint Edmunds Place
Heathrow, FL 32746**

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

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

Philip V. Patete

Name

1522 Saint Edmunds Place

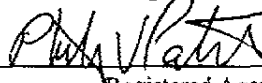
Florida street address (P.O. Box **NOT** acceptable)

Heathrow

FL 32746

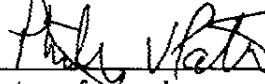
City, State, and Zip

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

(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.)

Philip V. Patete

Typed or printed name of signer

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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TALLAHASSEE, FLORIDA

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