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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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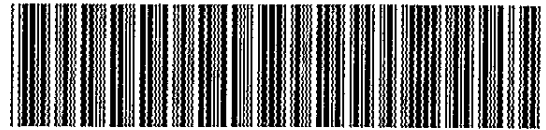
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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June 12, 2003

HARRIS BEACH 

ATTORNEYS AT LAW

99 GARNSEY ROAD  
PITTSFORD, NEW YORK 14534  
(585) 419-8800

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Eagle Eye LLC

Dear Sir or Madam:

Enclosed are Articles of Organization for a Florida Limited Liability Company and our firm's check in the amount of \$125.00 to cover the filing fee.

Please return the letter of acknowledgment to my attention at the address listed above. I have enclosed a self-addressed stamped envelope for your convenience.

If you have any questions, please do not hesitate to call me at (585) 419-8760.

Sincerely,



Carla J. Penazek  
Legal Assistant

/cjp

Encs.

cc: Mr. David A. Przysinda

Joseph A. Turri, Esq.

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

EAGLE EYE LLC

**ARTICLE II - Address:**

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

2303 Captain's Way, Jupiter, FL 33477

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

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

David A. Przysinda

Name

2303 Captain's Way

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

Jupiter,

FL 33477

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.*

/s/ David A. Przysinda

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

*Carla J. Penazek*

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.)

Carla J. Penazek, Authorized Representative

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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