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To: Florida Dept. of State From: Daniel R. Evans Re: Filing Fees

To whom it may concern,

I am sending in one check in the amount of \$125.00 in accordance with the \$100.00 LLC application fee and \$25.00 registered agent filing fee.

Any questions please do not hesitate to respond by e-mail, telephone, or post mail. Thank you

Daniel R. Evans 3937 w22nd st #b Panama City Fl 32405 850-785-4254

E-mail: motolok@chilitech.com



TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | |
|--|------------------------|
| SUBJECT: MTNDINKA L.L.C. (Name of Limited Liability Company) | |
| The enclosed Articles of Organization and fee(s) are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| DANIEL R. EVANS (Name of Person) | |
| MINDINKA L.L.C. (Firm/Company) | 03 JUN 20 SECNLIARY |
| 2815 LORADO AUE. (Address) | |
| Pavama C. Ly FL 32405 (City/State and Zip Code) | 3: 02 LORIDA |

For further information concerning this matter, please call:

Name of Person) at (850) 785 4254

(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street

Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

MAILING ADDRESS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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:

3937 LJ. ZZMST #B

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

DANIEL R. EVANS

The name of the Limited Liability Company is: MTNOTNKA LLC.

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

ARTICLE I - Name:

ARTICLE II - Address:

2815 LORADO AVE PANAMA CIN FL 32405

| City, State, and Zip | • |
|--|----------------|
| Having been named as registered agent and to accept service of process for the above stated l 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 provision statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S Registered Agent's Signature | s is of all |
| (An additional article must be added if an effective date is requested) Signature of a member of 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.) ANIEL R. FUNDS 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)