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DIVISION OF CORPORATIONS

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# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: OVOC, LLC	
(Name of Lim.	ited Liability Company)
The enclosed Articles of Organization and fe	ee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Dane S. Foster	
(Name of Person)	
OVOC, LLC	
(Firm/Company)	<del></del>
P.O. Box 880843	
(Address)	·
Boca Raton, Florida 33488-0843	
(City/State and Zip Code)	·
For further information concerning this matte	er, please call:
Dane S. Foster	at ( 954 ) 415 9011
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: OVOC, LLC

### **ARTICLE II - Address:**

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

Principal Office A	ddress:	Mailing Address:		
P.O. Box 880843 P.O. Box 880843		P.O. Box 880843		
Boca Raton, Florida 33488-0843 Boca Raton, Florida 33488-08		Boca Raton, Florida 33488-0843		
		stered Office, & Registered Agent's Signature: f the registered agent are:	03 JUL	DIVISION
	Dane S. Foster		2	SAL.
	Name		72	25 C
5582 Wellesley Park Drive. Apt 302		بي	OKAT MATS	
	Florida street address (P.O. Box NOT acceptable)		t D	Tions
	Boca Raton	<sub>FL</sub> 33433		<i>o</i> , –
	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

(CONTINUED)

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	Dane S. Foster		
• • • • • • • • • • • • • • • • • • • •	5582 Wellesely Park. Drive Apt 302	_	
	Boca Raton, Florida 33433	_	
· · · · · · · · · · · · · · · · · · ·			
		_	
		_	
MGRM	Jirada Bovornthamajak		
	1821 Florida Mango Rd.	_	
	West Palm Beach, Florida 33406	_ _	
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(Use attachment if necessary)			
(4 *** *** **** ***********************		PM	
NOTE: An additional article must be a	added if an effective date is requested.	ယ္	
<del>-</del> -		55	
REQUIRED SIGNATURE:			
	1		
	<del></del>		
Signature of a member of	nan authorized representative of a member.		
	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury are true.)		

Typed or printed name of signce

<u>Filing Fees:</u> \$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)