## LD30000280//

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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## TRANSMITTAL LETTER

TO: Registration Section		
Division of Corporations	-	
SIIRIFCT: Technical Rusiness Decisions	. // C	
SUBJECT: <u>Technical Business Decisions</u> (Name of Limit	ed Liability Company)	
The enclosed Articles of Organization and fee	e(s) are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
3379H1 D/I D 1.1		
William Brantley Daniel (Name of Person)		
(Ivalue of Person)		
Technical Business Decisions		
(Firm/Company)		
5037 Bellflower Court		
(Address)		
Melbourne, FL 32940		
(City/State and Zip Code)	<u> </u>	
For further information concerning this matter	, please call:	
William B. Daniel	at 321 259-1513	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street P.O. Box 6327		
Tallahassee, Florida 32399 Tallahassee, Florida 32314		

Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the I	ime: Limited Liability Compa	any is: Te	ChNICAL	Business	DECISIONS, LAC
ARTICLE II - A The mailing addre	ddress: ess and street address of	f the principal	office of the L	imited Liability Co	mpany is:
Principal Office	Address:		Mailing Ad	dress:	
5037 Bellflower Co	ourt		5037 Beliflov	wer Court	
Melbourne, FL 329	140	<b>-</b>	Melbourne, FL 32940		
The name and the	Florida street address of William Brantley D	_	d agent are:		SECRETARY DIVISION OF CO
Name			<u> </u>	戶鍋	
5037 Bellflower Court				F COVE	
Florida street address (P.O. Box NOT acceptable)				PROF RPO	
	Melbourne,	<sub>.FL</sub> - 32	2940	_	3: RA
	City, State, and Zip		- <del></del>	12	
liability company	ed as registered agent at at the place designated t and agree to act in this co	in this certifica	te, I hereby ac	cept the appointmen	t as

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:

itle: AGD" – Managar	Name and Address:			
MGR" = Manager MGRM" = Managing Member				
MGRM	William Brantley Daniel			
	5037 Beliflower Court			
	Melbourne, FL 32940			
MGRM	David Stewart Scholl			
	676 Spring Lake Drive			
	Melbourne, FL 32940			
MGRM	Yuval Ben-Moshe			
	4825 Sweet Gum Place			
	West Melbourne, FL 32904			
Use attachment if necessary)	_			
•,				

NOTE: An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:** 

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)

SECRETARY OF STALE