

L03000031330

(Requestor's Name)

Rountree
521 E 4th St
Panama City, FL 32401-3711

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

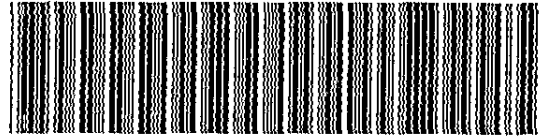
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800022339168

08/18/03--01036--002 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 AUG 18 PM 1:04

FILED

L03-31330
AR

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

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

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
128 Hitchcock Road
Southport, Florida 32409

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

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

Matthew L. McDonough

Name

521 E. 4th Street

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

Panama City FL 32401-3711

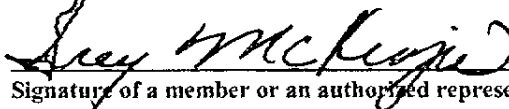
City, State, and Zip

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.)

Grey McKenzie; President

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)

0 AUG 18 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED