

L03000031587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

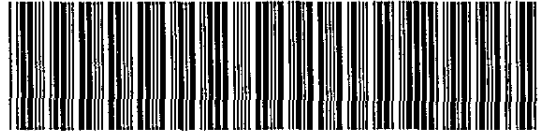
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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L03-31587
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Century III Build
2600 Westown Parkway Ste 1
West Des Moines, Iowa 502
Phone: 515.224.0
Fax: 515.224.7
www.tec-link.c

August 19, 2003

Florida Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Establishment of TEC-LINK LLC in Florida

Please find enclosed, the Articles of Organization along with associated filing fees (Requested Certified Copies). Listed below is the street and mailing address for TEC-LINK in Florida:

TEC-LINK LLC
Attn: Derek C. Holmes, Sr.
18436 Bridle Club Drive
Tampa, FL 33467
(515) 224-0087 voice
(515) 224-7604 fax

Sincerely,

Derek C. Holmes, Sr.
Tec-Link, Principal

03 AUG 20 PM 3:50
TEC-LINK LLC
FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TEC-LINK LLC

(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:

DEREK C. HOLMES, SR.

(Name of Person)

TEC-LINK LLC

(Firm/Company)

18436 BRIDLE CLUB DRIVE

(Address)

TAMPA, FL 33467

(City/State and Zip Code)

For further information concerning this matter, please call:

DEREK C. HOLMES, SR

(Name of Person)

at (515) 224-0087

(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

FILED
03 AUG 20 PM 2:50
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TEC-LINK LLC

ARTICLE II - Address:

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

Principal Office Address:

18436 BRIDLE CLUB DRIVE

TAMPA, FL 33467

Mailing Address:

18436 BRIDLE CLUB DRIVE

TAMPA, FL 33467

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

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

DEREK C. HOLMES, SR.

Name

18436 BRIDLE CLUB DRIVE

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

TAMPA, FL 33467

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..

Derek C. Holmes, Sr.

Registered Agent's Signature

(CONTINUED)

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03 JUN 20 PM 2:57
TAMPA, FL 33467

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM	DEREK C. HOLMES, SR.
	18436 BRIDLE CLUB DRIVE
	TAMPA, FL 33467
	DEREK C. HOLMES, SR. - PRINCIPAL

(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.)

DEREK C. HOLMES, SR. - PRINCIPAL

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)

FILED
03/11/11 PM 2:57
TAMPA, FL
CLERK OF COURT