

LO3000039576

Titus Tillman

(Requestor's Name)

3619 CAGNEY DR.

(Address)

(Address)

Tallahassee, FL 32309

(City/State/Zip/Phone #)



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MAIL

Tech-o-Nique, L.L.C.

(Business Entity Name)

(Document Number)

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Certificates of Status



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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TECH-0-NIQUE, 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:

Fernando E. Sanchez
(Name of Person)

(Firm/Company)

5511 Cypress Circle
(Address)

Tallahassee, Florida 32303
(City/State and Zip Code)

For further information concerning this matter, please call:

Fernando E. Sanchez at (850) 536-0036
(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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – NAME:

The name of the Limited Liability Company is:
TECH-O-NIQUE, L.L.C.

ARTICLE II – ADDRESS:

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

Principal Office Address:

5511 Cypress Circle
Tallahassee, Florida 32303

Mailing Address:

5511 Cypress Circle
Tallahassee, Florida 32303

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

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

Fernando E. Sanchez
Name

5511 Cypress Circle
Florida Street Address

Tallahassee, Florida 32303
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

"MGRM" = Managing Member

Name and Address:

MGRM

Fernando E. Sanchez
5511 Cypress Circle
Tallahassee, Fl. 32303

MGRM

Eduardo F. Sanchez
5799 Cypress Circle
Tallahassee, Fl. 32303

MGRM

Michael Savage
3429 Castlebar Circle
Tallahassee, Florida 32309

MGRM

Titus Tillman
3619 Cagney Drive
Tallahassee, Florida 32309

MGRM

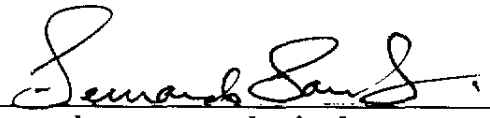
Michael Baker
5666 Split Oak Lane
Tallahassee, Florida 32303

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(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.)

Fernando E. Sanchez
Typed or printed name of signee

Filing Fees: