

**L040000003117**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H04000007244 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

RECEIVED  
04 JAN 13 AM 8:03  
DIVISION OF CORPORATION

**LIMITED LIABILITY COMPANY**

**SOTIRIS P. BAXIVANAKIS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

AND FILED  
04 JAN 12 AM 10:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing

Public Access Help

*JD H304*

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**  
(Pursuant to s.608.407, Florida Statutes)

**ARTICLE I - NAME**

The name of the Limited Liability Company is: **Sotiris P. Baxivanakis, LLC**

**ARTICLE II - ADDRESS**

The mailing address of the principal office is: **3055 Atlantis Drive  
Holiday, FL 34691**

**ARTICLE III - REGISTERED AGENT**

The name and address of the registered agent are: **Sotiris P. Baxivanakis  
3055 Atlantis Drive  
Holiday, FL 34691**

*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.*

  
Signature of Registered Agent **01/09/04**

**ARTICLE IV - MANAGEMENT**

The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

**Sotiris P. Baxivanakis  
3055 Atlantis Drive  
Holiday, FL 34691**

*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 within are true.*

  
Signature of Member/Manager **01/09/04**

04 JAN 12 AM 10:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED