

L04000003161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

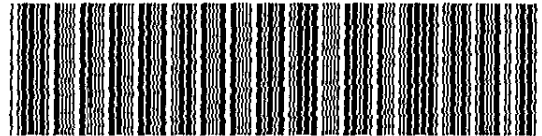
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/09/04--01018--004 \*\*130.00

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04 JAN -9 AM 11:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/13  
[Signature]

January 6, 2004

Division of Corporations  
Registration Section  
P. O. Box 6327  
Tallahassee, Florida 32314

To Whom It May Concern:

Enclosed you will find a check for the following:

Articles of Organization - \$100.00  
Designation of Registered Agent - \$25.00  
Certificate of Status - \$5.00

Totaling \$130.00

The check is for Mark Moloney, for new business named Network Security and Support, LLC.

Thank you

Mark Moloney

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Network Security and Support 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:

Mark Moloney  
(Name of Person)

Network Security and Support LLC  
(Firm/Company)

1050 Windsong Circle  
(Address)

Apopka, FL 32703  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Moloney at ( 407 ) 399-1175  
(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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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Network Security and Support LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

1050 Windsong Circle

Apopka, FL 32703

**Mailing Address:**

1050 Windsong Circle

Apopka, FL 32703

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

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

Florida Incorporating and Registered Agents, Inc.

Name

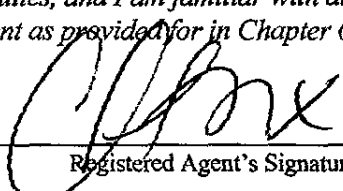
122 West Hillcrest Street

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

Altamonte Springs, FLORIDA 32714

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, Florida Statutes..*

  
\_\_\_\_\_  
Registered Agent's Signature

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CLERK OF THE  
TALAHASSEE, FLORIDA

**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:**

MGR

Mark Moloney

1050 Windsong Circle

Apopka, FL 32703

\_\_\_\_\_

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(Use attachment if necessary)

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TALLAHASSEE, FLORIDA

**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.)

Mark E. Moloney  
Typed or printed name of signer

**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)