Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Faroma

Account Name : INCORPORATETIME.COM, INC.

Account Number : I19990000221 Phone : (631)224-9004

Fax Number : (631)589-2848.

LIMITED LIABILITY COMPANY

1EZFORM, LLC.

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I: NAME:

The name of the Limited Liability Company is:

1EZFORM, LLC.

ARTICLE II: ADDRESS:

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

\$20 COZYBROOK LANE, ORANGE PARK, FL 32003

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

TODD STANDISH 620 COZYBROOK LANE ORANGE PARK, FL 32003

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

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ARTICLE I	V: MANAGEMENT (Check if applicable).
	The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager managed company.
ARTICLE V	V: The initial member(s) of the Limited Liability Company is/are as follows:
TOD	D STANDISH 620 COZYBROOK LANE, ORANGE PARK, FL 32003
	TODD STANDISH, 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.)

TODD STANDISH, Member

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