.....

02/18/2004 Division

.

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.

(((H04000044343 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 | ; | A.B.S. OF JACKSONVILLE, | INC. |
|----------------|---|-------------------------|------|
| Account Number | : | 120010000215 | |
| Phone | : | (904)777-1533 | |
| Fax Number | : | (904)777-1717 | |

| LIMT | TED LIABILITY (Micah Technologies, I | | FILED 04 MAR -1 AM 11: 46 SECRETARY OF STATE TALLAHASSEE. FLORID |
|---|--|----------|---|
| Certifi | cate of Status | 1 | AIDE TO |
| Certified Copy | | 0 | |
| Page Count | | 01 | |
| Estimated Charge | | \$130.00 | ·_ : |
| Electronic Filing Menu | Corporate Filing | Publi | ACCORPORATION |
| the left and releasing of the second s | | | 3/1/2004 |

. 02/10/2004 14:18 9043747031

A: AFFORDABLE COPIER

PAGE 02

MAR -

H04000044343 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME:

The name of the Limited Liability Company is: Micah Technologies, LLC

ARTICLE II. ADDRESS:

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

8237 Rain Forest Drive Orlando, FL 32825

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

The name and Florida street address of the registered agent are: Joseph M. Morse, MGR. 8237 Rain Forest Drive Orlando, FL 32825

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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.

e/ Registered Agent

Date

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

<u>Title:</u> MGR Name and Address: Joseph M. Morse 8237 Rain Forest Drive Orlando, FL 32825

4040000 443

. , Ø2/10/2004 14:18 9043747031

A:AFFORDABLE COPIER

PAGE 03

H04000044343 3

REQUIRED SIGNATURE:

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this <u>26</u> day of <u>FAB</u>, 2004

Steph M. Marse Member

3/20/09

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an atlignation under penalties of perjury that the facts stated herein are true.)



H04000044343 3