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SECRETARY OF STATE



Sertopia Technologies, LLC 5025 Timber Lane Drive Cocoa, Fl 32926-2556

Date 3-17-2004

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Please Find enclosed the following:

One signed and completed Transmittal Letter

Two signed and completed copies of the Article of Organization for

Limited Liability Company, Sertopia Technologies LLC.

One check # 1484, value \$ 160.00 for following fees

Filing Fee for Articles of Organization
Designation of Registered Agent
Certified Copy
Certificate of Status
\$ 100.00
\$ 25.00
\$ 30.00
\$ 5.00

Total \$ 160.00

Florida

Kenneth Belle

Owner/Registered Agent

TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations	· · · · -	
SUBJE			
	(Name of Limited Liability Company)		
The end	closed Articles of Organization and fee(s) are submitted for filing.		
	Please return all correspondence concerning this matter to the following:		
	Kenneth Belle		
	(Name of Person)		
	Sertopia Technologies, LLC		
	(Firm/Company)		
	5025 Timber Lane Drive		
	(Address)		
	Cocoa, Fl 32926-2556		
	(City/State and Zip Code)		
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For fur	ther information concerning this matter, please call:		
	(Name of Person) (Area Code & Daytime Telephone	Number)	_
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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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Sertopia Technologies, LLC							
ARTICLE II - Address: The mailing address and street addres	ss of the principal office of the Limited Liability Company is:						
Principal Office Address:	Mailing Address:						
Sertopia Technologies, LLC	Sertopia Technologies, LLC						
5025 Timber Lane Drive	5025 Timber Lane Drive						
Cocoa, Fl 32926-2556	Cocoa, FL 32926-2556						
The name and the Florida street addre	Kenneth Belle Name Solution Street address (P.O. Box NOT acceptable) Sess of the registered agent are: ARE JARY ASSITE ARE ARE JARY A						
Cc	Ocoa, <u>FLORIDA</u> 32926-2556_ City, State, and Zip						
company at the place designated in this agree to act in this capacity. I further ag and complete performance of my duties registered agent as	t and to accept service of process for the above stated limited liabils certificate, I hereby accept the appointment as registered agent as gree to comply with the provisions of all statutes relating to the property, and I am familiar with and accept the obligations of my position as provided for in Chapter 608, Florida Statutes Registered Agent's Signature						

Page 1 of 2 (CONTINUED)

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

<u>Title:</u>	Name and Address:		
"MGR" = Manager			
"MGRM" = Managing Me	ember		
-Owner Marm	Kenneth Belle		5 75
-OWHEL- 11 1821111			- 1
	_5025 Timber Lane Drive		.*
	_Cocoa, FL 329226-2556		
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(Use attachment if necess	ary)		
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NOTE: An additional ar	ticle must be added if an effective date is requested.	- n	
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	Kernella Belle 75 0	Ö	
	a member or an authorized representative of a member.		
	te with section 608.408(3), Florida Statutes, the execution		
	ient constitutes an artification under the penalties of perjury		
that the facts	stated herein are true.)		
	KENNETH BELLE Typed or printed name of signee		
	Typed or printed name of signee		

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)