Page 1 of 1

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.

(((H04000108799 3)))

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

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name Account Number : 070744001530

: ACE INDUSTRIES, INC.

Phone

: (305)358-2571

Fax Number

: (305)373-7718

DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

ASHTON INNOVATIONS, LLC

Certificate of Status	0
Certified Copy	I
Page Count	A19
Estimated Charge	\$155.00

Name Availability

Document Flammer

DIR FILIPOLINADIA

Comporte Films

Upriater Updater DCC Verifyer

どしじ toknovdedga rest

N. P. Verityer いしし

H04-108799

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name of Limited Liability Company:

ASHTON INNOVATIONS, LLC

ARTICLE II - Mailing Address & Street Address of Limited Liability Company:

Address: 2409 KACIE LANE

City, State & Zip; ST. AUGUSTINE, FL. 32085

ARTICLE III - Registered Agents Name, Office Address, & Registered Agent's Signature:

BRADLEY A. ASHTON Name

2409 KACIE LANE Address (P.O. Box NOT Acceptable)

ST. AUGUSTINE, FL. 32805 City, State, 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, F.S.

Chapter 608, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. Specify name & address(es).

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.

BRADLEY A. ASHTON
Typed or printed name of signee