

L04000045921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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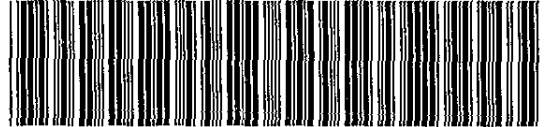
(Business Entity Name)

(Document Number)

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AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ARCHETYPE DISTRIBUTION, LLC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
ARCHETYPE DISTRIBUTION, LLC.

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TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of this Limited Liability Company is:

ARCHETYPE DISTRIBUTION, LLC.

ARTICLE II PURPOSE

This Limited Liability Company is organized for the purposes of transacting any and all lawful business or activity permitted under the laws of the United States and the State of Florida.

ARTICLE III ADDRESS

The principal office and mailing address of this Limited Liability Company, which are identical, is:

Address: 13885 FARMER ROAD, VILLAGE OF PALMETTO BAY, FL 33158

ARTICLE IV INITIAL REGISTERED OFFICE AND AGENT

The initial registered office address and agent of this Limited Liability Company is: Agent: ALBERT D. ESTEVEZ

Address: 13885 FARMER ROAD, VILLAGE OF PALMETTO BAY, FL 33158

ARTICLE V AMENDMENTS

This Limited Liability Company, with the unanimous written consent of the members, shall have the right to amend or repeal any provisions contained in these Articles of Organization or any amendments hereto. Further, the power to adopt, alter, amend or repeal the Company's operating agreement shall be vested in the Company's members.

ARTICLE VI MANAGEMENT / MEMBERS

This Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

This Limited Liability Company will be managed by one manager and will have one member initially.

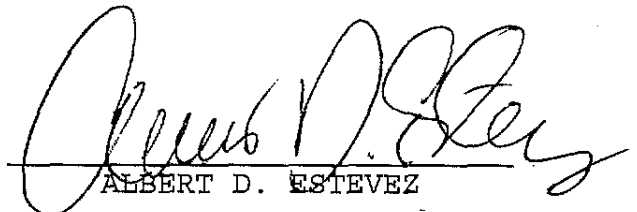
The name and address of each Manager or Managing Member of this Limited Liability Company are:

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>
<u>ALBERT D. ESTEVEZ</u>	<u>13885 FARMER ROAD</u> <u>PALMETTO BAY, FL 33158</u>	<u>MANAGER/MEMBER</u>

ARTICLE VII INDEMNITY

This Limited Liability Company does hereby indemnify its Managers for any of their conduct on behalf of or related to their duties as Managers of the Limited Liability Company and hold them harmless for any acts on behalf of or in connection with their services for the Limited Liability Company.

The undersigned has executed these Articles of Organization this 16th day of JUNE, 2004.


ALBERT D. ESTEVEZ

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM
PROCESS MAY BE SERVED.

Pursuant to the provisions of the Florida Statutes, the undersigned
Limited Liability Company, organized under the laws of the state
of Florida, submits the following statement in designating the
registered office / registered agent, in the state of Florida.

1. The name of this L.L.C. is: ARCHETYPE DISTRIBUTION, LLC.
2. The name and address of the registered agent and office is:

Name: ALBERT D. ESTEVEZ

Address: 13885 FARMER ROAD, VILLAGE OF PALMETTO BAY, FL 33158

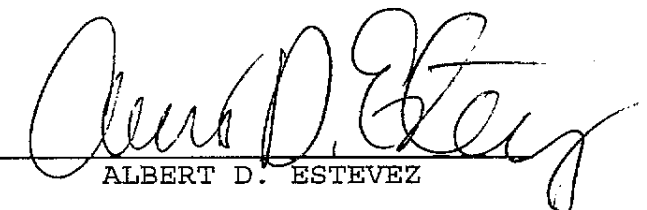

ALBERT D. ESTEVEZ

TITLE: Registered Agent

DATE: JUNE 16, 2004

ACKNOWLEDGMENT AND ACCEPTANCE

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.


ALBERT D. ESTEVEZ

DATE: JUNE 16, 2004