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### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CUDA SYSTEMS LLC (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
KARL S DENNINGER (Name of Person)	
(Firm/Company)	
314 OLDE POST RD (Address)	.—_
NICE UT LIE FL 32578 (City/State and Zip Code)	
For further information concerning this matter, please call:	
KARL S DENNINGEX at (850) 897-4854 (Area Code & Daytime Telephone Number)	

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

#### ARTICLE I - Name

The name of the limited liability company is "CUDA SYSTEMS LLC"

#### **ARTICLE II - Principal Office**

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

Principal Office Address 314 Olde Post Road Niceville, FL 32578 Mailing Address 314 Olde Post Road Niceville, FL 32578

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

Karl S. Denninger

Name

314 Olde Post Road

Florida street address

Niceville, FL 32578

City, State and 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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (Continued)

#### Article IV - Manager(s) or Managing Member(s)

Title:

Name and Address

"MGRM" = Managing Member

"MGR" = Manager

**MGRM** 

Karl S. Denninger 314 Olde Post Road Niceville, FL 32578

REQUIRED SIGNATURE:

Signature of a member or 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.)

Karl S. Denninger
Typed name of signee

Filing Fees:

\$100.00 Filing fee for Articles of Organziation

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified copy (Optional)

\$ 5.00 Certificate of Status (optional)