

W4000064772

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)205-0383

From:  
Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

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DIVISION OF CORPORATION

SECRETARY OF STATE  
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**LIMITED LIABILITY COMPANY**

**ime training llc**

Certificate of Status	0
Certified Copy	1
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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

IMC TRAINING LLC

## ARTICLE II - Address:

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

7187 VIA LEONARDO  
LAKE WORTH FL 33467

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

The name and the Florida street address of the registered agent are:

BEYONDA H PINTO  
Name  
7187 VIA LEONARDO  
Florida street address (P.O. Box NOT acceptable)  
LAKE WORTH FL 33467  
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, F.S.

BEYONDA H PINTO  
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.

BEYONDA H PINTO

(An additional article must be added if an effective date is requested)

BEYONDA H PINTO  
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.)

BEYONDA H PINTO  
Typed or printed name of signer

## FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)

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TALLAHASSEE, FLORIDA