

L04600086119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

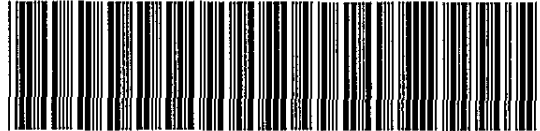
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04 NOV 29 PM 3:57  
STATE  
DEPARTMENT OF REVENUE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE  
11/24/04

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*[Handwritten scribble]*  
TALLAHASSEE, FLORIDA

**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Nexpak, LLC

11/29

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name

Date

Time

Walk-In

Will Pick Up

EFFECTIVE DATE

11/29/04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 NOV 29

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- \_\_\_\_ Art of Inc. File \_\_\_\_\_
- \_\_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_\_ Foreign Corp. File \_\_\_\_\_
- ☒ L.C. File \_\_\_\_\_
- \_\_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_\_ Merger File \_\_\_\_\_
- \_\_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- \_\_\_\_ Cert. Copy \_\_\_\_\_
- ☒ Photo Copy \_\_\_\_\_
- \_\_\_\_ Certificate of Good Standing \_\_\_\_\_
- \_\_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_\_ Officer Search \_\_\_\_\_
- \_\_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_\_ Driving Record \_\_\_\_\_
- \_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**EFFECTIVE DATE**  
11/24/04

**NEXPAK, LLC**

**FILED**  
04 NOV 29 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - NAME**

The name of the Limited Liability Company is: NEXPAK, LLC.

**ARTICLE II - ADDRESS**

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

Principal Office Address:

Mailing Address:

1810 South MacDill Avenue, Suite 4  
Tampa, Florida 33629

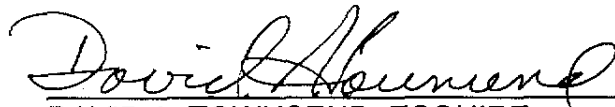
Same

**ARTICLE III - REGISTERED AGENT, REGISTERED  
OFFICE AND REGISTERED AGENT'S SIGNATURE**

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

DAVID A. TOWNSEND, ESQUIRE  
Townsend & Brannon  
608 West Horatio Street  
Tampa, Florida 33606-2228

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.

  
\_\_\_\_\_  
DAVID A. TOWNSEND, ESQUIRE  
Registered Agent

**ARTICLE IV - MANAGING MEMBERS**

The name and address the Manager is as follows:

NEXPAK, INC., a Florida corporation  
1810 South MacDill Avenue, Suite 4  
Tampa, Florida 33629

**ARTICLE V - EFFECTIVE DATE**

The effective date of this Limited Liability Company is November 24, 2004.

Signature of authorized representative  
of the Manager:

By: Richard L. Brown  
RICHARD L. BROWN, as Vice President of  
Nexpak, Inc.

(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.)