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## TRANSMITTAL LETTER

STREET ADDRESS: MAILING ADDRESS:					
□ \$125.00 Filing Fee Certificate of Status  □ \$130.00 Filing Fee Certified Copy (additional copy is enclosed)  □ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)					
Enclosed is a check for the following amount:					
Steven 5 Markwith at (904) 406 0263 (Area Code & Daytime Telephone Number)					
For further information concerning this matter, please call:					
Middleburg FL 32068 (City/State and Zip Code)					
m 111 $l$					
3960 Sereno Ct (Address)					
At Home PC Solutions LLC (Firm/Company)					
Steven S. Markwith (Name of Person)					
Please return all correspondence concerning this matter to the following:					
The enclosed Articles of Organization and fee(s) are submitted for filing.					
(Name of Limited Liability Company)	f.				
SUBJECT: At Home PC Solutions Limited Lightlity Company	_				
Division of Corporations					

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

rincipal Office Address:	Mailing Address:
3960 Sereno Ct	3960 Sereno Ct
Middlehura FL	Middlehura, FL
32068	32068

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

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

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Steven S. Markwith

Name

3960 Sereno Ct

Florida street address (P.O. Box NOT acceptable)

Middlehurg FL 32068

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..

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Steven S. Markwith 3960 serena ct Middleburg, FL 32068
	3960 Serens Ct
	Madienurg, FC 32058
(Use attachment if necessary)	
NOTE: An additional article must	t he added if an affective date is requested

**REQUIRED SIGNATURE:** 

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.)

Steven S Markwar Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)