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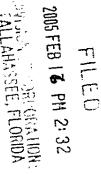
(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Durer Technical LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: David F. Bogle (Name of Person)
(Marie of Fellow)
Durer Technical LLC (Firm/Company)
(Firm/Company)
PO Box 1179
(Address)
Haines City F1 33845-1179 (City/State and Zip Code)
For further information concerning this matter, please call:
David F. Boale at (863) 557 - 9172 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status □ \$155.00 Filing Fee & Certificate of Status □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327
Tallahassee, Florida 32399 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Durer Technical 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: 7.32
Time par Office Address.
P.O. Box 1179 P.O. Box 1179
Haines City F1 33845-1179 Haines City F1 33845-1179
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
TARKET DE ALL TEORISTICS NEGLES CONTROL OF ANGUSTRE CONTROL OF THE
The name and the Florida street address of the registered agent are:
David F. Bogle
Name
128 Terrace Drive Apt 11
Florida street address (P.O. Box NOT acceptable)
Haines City FL 33844
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

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	David F. Bogle 128 Terrace Dr. Apt 11 Haines City F1 33844	
	2005 FE	FILEU 32:32
(Use attachment if necessary)	HASS:	TILEU PA
NOTE: An additional article	must be added if an effective date is requested.	显言
REQUIRED SIGNATURE:	must be added if an effective date is requested.): 32
(In accordance v	sember or an authorized representative of a member. ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury	

Filing Fees:

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

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee