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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

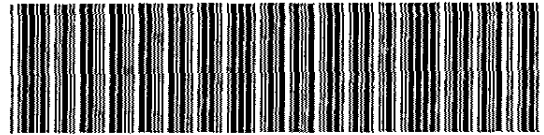
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MAR 14 2005

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NEXGEN TECHNOLOGY, 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:

CARLOS HERNANDEZ JR.  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

511 BARCLAY AVENUE  
(Address)

ALTAMONTE SPRINGS, FL 32701  
(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS HERNANDEZ JR. at (321) 214-9241  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|--|

**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

NEXGEN TECHNOLOGY, LLC  
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – NAME:

The name of the Limited Liability Company is NEXGEN TECHNOLOGY, LLC.

ARTICLE II – ADDRESS:

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

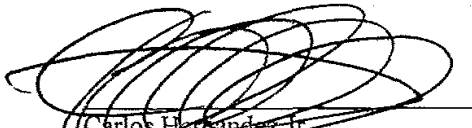
511 Barclay Avenue  
Altamonte Springs, Florida 32701

ARTICLE III – AGENT:

The name of the Florida street address of the registered agent is:

Carlos Hernandez Jr.  
511 Barclay Avenue  
Altamonte Springs, Florida 32701

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 Chapter 608, F.S..

  
Carlos Hernandez Jr.  
Registered Agent

ARTICLES OF ORGANIZATION  
(Continued)  
Page 1 of 2

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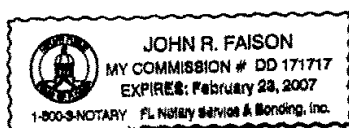
STATE OF FLORIDA  
COUNTY OF Seminole

The foregoing instrument was acknowledged  
before me this 10 day of MARCH,  
2004, by CARLOS HERNANDEZ JR



(SEAL)

PRINT, TYPE OR STAMP NAME OF NOTARY



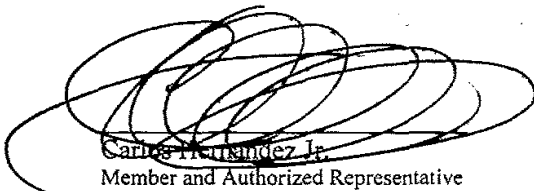
ARTICLE IV- MANAGEMENT:

This Limited Liability Company is a manager-managed company with one or more managers: The name and address of each manager is as follows:

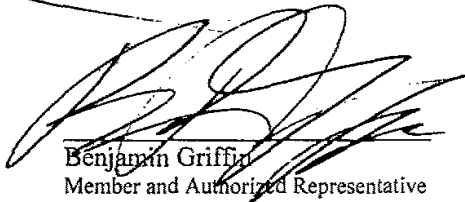
Carlos Hernandez Jr. - Manager  
511 Barclay Avenue  
Altamonte Springs, FL 32701

Benjamin Griffin - Manager  
511 Barclay Avenue  
Altamonte Springs, FL 32701

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that facts stated herein are true.

  
Carlos Hernandez Jr.  
Member and Authorized Representative

3/10/05  
DATE


  
Benjamin Griffin  
Member and Authorized Representative

3/10/05  
DATE

STATE OF FLORIDA  
COUNTY OF Sumter

The foregoing instrument was acknowledged  
before me this 10 day of MARCH  
2005 by CARLOS HERNANDEZ JR. and Benjamin Griffin

(SEAL)

  
PRINT, TYPE OR STAMP NAME OF NOTARY

