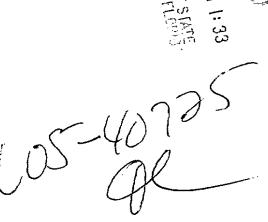


(Requestor's Name) (Address)	
(Address)	3000505071
(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number)	04/21/05—01043—002 **125.00
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	SECTIONS OF STREET

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TRANSMITTAL LETTER

TO:

Registration Section

Division of Corp	porations				
SUBJECT:	FUTURA, LLC				
	(Name of Limited	d Liability Comp	any)		
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filin	ıg.		
Please return all correspo	ondence concerning this matte	er to the followin	g:		
	Timothy A.Boyko				
	Q	Name of Person)			
	Boyko & Dobeck				
	(Firm/Company)	***		
	6741 Ridge Road				
		(Address)			
	Parma, OH 44129				
	(City	State and Zip Cod	ie)		
For further information of	concerning this matter, please	call:			
Timothy A. Bo	yko	at (440	886-38	00	
(Name	of Person)		de & Daytime Te	lephone Number)	-
				70	23
Enclosed is a check fo	r the following amount:			LEG	5
SS \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 I Certified Cor (additional cop	ру	Certified Copy	2165 APR 2
				(additional copy is eholosed	
STRE	ET ADDRESS:	·	MAILING A	DDRESS:	ω ω
	ration Section	_	Registration Se		. ຜ
	on of Corporations	_	Division of Co		
	Gaines Street assee, Florida 32399	-	P.O. Box 6327 Tallahassee, F		
1 anan	10.104 32377				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R'	T	CL	F.	ĭ	N	яm	e

The name of the Limited Liability Company is:

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

Principal	Office	Address:
T 4 1 1 1 7 7 7 7 1 1 1 1	~ Lx.~~	+ 700 067 00000

Mailing Address:

c/o John A. Neff	_	c/o John A. Neff
5721 W. Ridgewood Drive	7-2	5721 W. Ridgewood Drive
Parma, OH 44129	- =	Parma, OH 44129

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

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

GERALDINE	RICHEY		:
	Name	 	
4714 West	Boulevard	in in the Hi s e	
	Florida street address (P	O. Box NOT acceptable)	
Naples	, FL	34103	
	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 reluting 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 408, F.S.

Registered Agent's Signature

Geraldine Richey

(CONTINUED)

2005 APR 21 PM 1: SECRETARY OF STATE

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	· ·
MGRM	Michael E. Nadeo
	5964 Canterbury Road, S. North Olmsted, OH 44070
_MGRM	Gary Machalicek 22456 Christopher Court Strongsville, OH 44136
MGRM	John A. Neff
	5721 W. Ridgewood Drive Parma, OH 44129
The state of the s	

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

John A. Neff

(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.)

John A. Neff
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)