

LD5000104920

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400059710374

09/19/05--01040--002 ** 01.07

10/25/05--01002--002 ** 01.07

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 OCT 26 AM 10:42



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 28, 2005

KRISTOPHER J. JANSMA
11767 SO. DIXIE HIGHWAY
SUITE 298
MIAMI, FL 33156

SUBJECT: TECH MASTERS, LLC
Ref. Number: W05000044842

We have received your document for TECH MASTERS, LLC and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Limited Liability Company cannot file a Domestication. Enclosed are the proper forms for filing a Limited Liability Company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 405A00059202

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Tech Masters, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

11767 So. Dixie Hwy
Suite 298
Miami, FL 33156

11767 So. Dixie Hwy
Suite 298
Miami FL, 33156

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

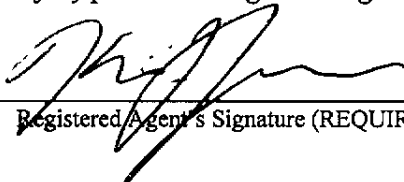
The name and the Florida street address of the registered agent are:

Kristopher Jansma
Name

11767 So. Dixie Hwy Suite 298
Florida street address (P.O. Box **NOT** acceptable)

Miami FL 33156
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 (REQUIRED)

(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

"MGRM" = Managing Member

Name and Address:

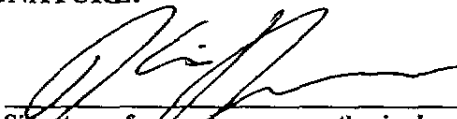
MGRM

Kristopher Jansma
11767 So. Dixie Hwy, Suite 298
Miami FL 33156

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Kristopher Jansma

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)

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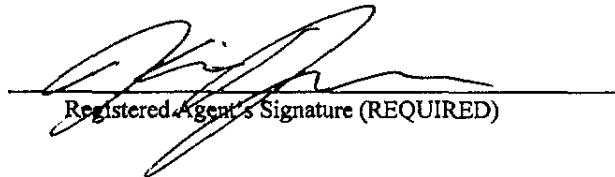
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Registered Agent's Signature (REQUIRED)

(CONTINUED)

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"MGRM" = Managing Member

Name and Address:

MGRM

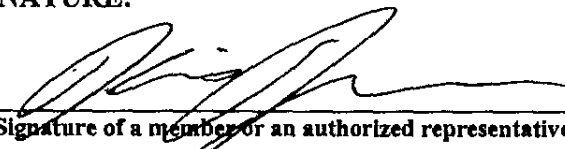
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