

11/16/2005 01/35

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CT CORPORATION SYSTEM

PAGE 01/05

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TRANSMISSION VERIFICATION REPORT

TIME : 11/10/2005 16:28
NAME : CT CORPORATION SYSTEM
FAX : 8508785926
TEL : 8502221092
SER.# : BROE4J579534

DATE, TIME
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DURATION
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MODE

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Division of Corporations

Page 1 of 1

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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

LIMITED LIABILITY COMPANY

GLOBAL INTEGRATION INTERNATIONAL, LLC

LOS-111193

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LIMITED LIABILITY COMPANY
GLOBAL INTEGRATION INTERNATIONAL, LLC

Certificate of Status	0
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CT CORPORATION SYSTM

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CT CORPORATION

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P.02/04

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Global Integration International, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and Rec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph M. Seigler, Jr.

(Name of Person)

Brinson, Askew, Berry, Seigler, Richardson & Davis, LLP

(Firm/Company)

615 West First Street, P.O. Box 5513

(Address)

Rome, Georgia 30162-5513

(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph M. Seigler, Jr.

(Name of Person)

at (706)

291-8853

(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 & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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CT CORPORATION

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Global Integration International, 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:

1629 Kitler Road
Jacksonville, FL 32226

Mailing Address:

1629 Kitler Road
Jacksonville, FL 32226

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:

CT Corporation System

Name

1200 South Pine Island Road

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

Plantation, Florida 33324

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..

CT Corporation System

Connie Bryar **CONNIE BRYAR**

SPECIAL ASSISTANT SECRETARY

Registered Agent's Signature (REQUIRED)

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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:

Manager

Fred Taylor


6 Riverside Industrial Park Drive

Rome, Georgia 30161

(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.)

Fred Taylor

Typed or printed name of signer

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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