

LD0000032921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

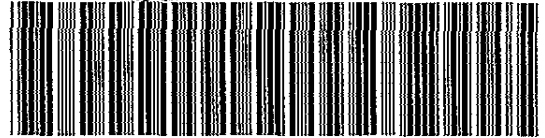
Special Instructions to Filing Officer:

PL UC

Office Use Only

03/29

EXPIRATION DATE  
3/31/06



300068645213

03/27/06--01033--009 \*\*125.00

APPROVED  
AND  
FILED

06 MAR 27 PM 4:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Oxygen Technology International, L.L.C.  
(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:

John W. Cantwell

(Name of Person)

Oxygen Technology International

(Firm/Company)

340 Sunset Dr. Suite 1405

(Address)

Fort Lauderdale FL 3301

(City/State and Zip Code)

For further information concerning this matter, please call:

John W. Cantwell

(Name of Person)

at ( 954 ) 467-3405

(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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

EXPIRATION DATE  
3/2/06

Oxygen Technology 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:

### Mailing Address:

340 SUNSET DR. Suite 1405  
OXYGEN Technology International  
FORT LAUDERDALE FL.

OXYGEN Technology International  
340 SUNSET DR. Suite 1405

## 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:

John W. Cantwell  
Name  
Essex Towers # 1405  
340 SUNSET DR.  
Florida street address (P.O. Box NOT acceptable)  
Fort Lauderdale FL 33301  
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..

John W. Cantwell  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 MAR 27 PM 4:12

APPROVED  
AND  
FILED

**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- CHAIRMAN

John W. Cantwell  
340 SUNSET DR. #1405  
FT. LAUDERDALE, FL. 33301

MGRM

EVALYNA D. CANTWELL  
340 SUNSET DR. #1405  
FT. LAUDERDALE, FL. 33301

MGRM

Patrick Higgins  
6 Turners Crescent, Herts  
CM23 4FZ, England

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: MAR 31, 2006. (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:**

John W. Cantwell  
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.)

John W. Cantwell  
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)

06 MAR 27 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED