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(Req	uestor's Name)		
(Add	ress)		
(Add	ress)		
(City)	/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to F	iling Officer:		

Office Use Only



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Mental Control of Self-Mestal Assessments





TRANSMITTAL LETTER

TO: Registration Se Division of Con					
SUBJECT: COMPET	TIVE EDGE , LLC	I Liability Company)			
	(1 tomate of marriage	· Diaming Conipuly)			
The enclosed Articles of	f Organization and fee(s) are su	abmitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
VLADIMI	R ILICH CHVALBO				
	(1)	Name of Person)			
		Firm/Company)			
	ζ-	anii oompung			
7846 SNC	WBERRY CIRCLE			21	9
		(Address)		2006 APR 28 PM 4: 54	AMS TO ABY SONS AME
				PR	- 1
ORI A	ANDO, FLORIDA 32819			28	7.
		State and Zip Code)		<u></u>	3.E
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For further information	concerning this matter, please	call:		<u>5</u>	
				4	1 55
ART MELNIKOV		at (440) 454-3020 (Area Code & Daytime To	-I-ut-u-Ni-u-t-o		
(Name	of Person)	(Area Code & Daytime 1	elephone Number)		
Enclosed is a check fo	r the following amount:			,	
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S \$160.00 Filing Certificate of Statu Certified Copy (additional copy is enco	s &	
	ET ADDRESS:	MAILING ADDRESS: Registration Section			

Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Con	npany is:	
COMPETITVE EDGE , LLC		
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
7846 SNOWBERRY CIRCLE	7846 SNOWBERRY CIRCLE	
ORLANDO, FLORIDA 32819	ORLANDO, FLORIDA 32819	
The name and the Florida street address VLADIMIR ILICH CH 7846 SNOWBERRY CO	Name	2006 APR 28
ORLANDO.	32819	3 96
	City, State, and Zip	^{Տ.ԼՋ]} եր 4: 5 4
liability company at the place design registered agent and agree to act in the statutes relating to the proper and confidence accept the obligations of my position.	nt and to accept service of process for the abor- gnated in this certificate, I hereby accept the a is capacity. I further agree to comply with the emplete performance of my duties, and I am fa on as registered agent as provided for in Chap ared Agent's Signature	ove stated limited ppointment as e provisions of all amiliar with and

(CONTINUED)

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

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	VLADIMIR ILICH CHVALBO	
	7846 SNOWBERRY CIRCLE	_
	ORLANDO, FLORIDA 32819	_
MGR	ART MELNIKOV	
	1 OCEANS WEST BLVD, UNIT 5B5	_
	DAYTONA BEACH SHORE, FLORIDA 32118	_
		_
		<u></u>
		_
		- 28 0 oiv
		DIVISION 2006 APR
ay		01VISIAR JARY 2006 APR 28
(Use attachment if necessary)		22 S
NOTE: An additional article must	t be added if an effective date is requested.	
REQUIRED SIGNATURE:		5. 5. 14. 2.4 by 16. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15
· Charles		
Signature of a memb	er or an authorized representative of a member.	

Typed or

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)
VLADIMIR ILICH CHVALBO

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)