## L00000181982

(Requestor's Name)			
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(City/State/Zip/Pho	ne #)		
PICK-UP WAIT	MAIL		
(Business Entity Name)			
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Certified Copies Certificate	es of Status		
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## **COVER LETTER**

TO: Registration Se Division of Cor				
<sub>SUBJECT:</sub> Algae	Tec, LLC			
	(Name of Limite	d Liability Company)		
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspond	ondence concerning this matte	er to the following:		
Patrick H.	Norausky			
	(	Name of Person)		<del></del>
Algae Tec	, LLC		;	
	(	Firm/Company)		900Z
4313 Rou	ind Lake Court, S	Suite 200		2006 OCT 18 PH 2: 48
<del> 1000</del>		(Address)		<b>3</b> 3
Tampa, F	L 33618-5313			<b>PH</b> 경영
	(City	/State and Zip Code)		<b>2:</b>
For further information of	concerning this matter, please	call:		<b>8</b>
Patrick H. Nora		at (813 ) 476-54	<del></del>	
(Name	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for	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)	✓ \$160.00 Filing Certificate of Status Certified Copy (additional copy is encl	s &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
Algae Tec, LLC Must end with the words "Limited Liability Company, "Limited	l Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
313 Round Lake Court, Suite 200 ampa, FL 33618-5313	4313 Round Lake Court, Suite 200 Tampa, FL 33618-5313
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Patrick H. Norausky	الله الله الله الله الله الله الله الله
Name	PH 2
4313 Round Lake Court,	Suite 200  ress (P.O. Box NOT acceptable)
	FL 33618-5313

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



<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	r
MGRM	Patrick H. Norausky
	4313 Round Lake Court, Suite 200
	Tampa, FL 33618-5313
	•
GI 1 (16	
(Use attachment if necessary)	
ICLE V: Effective date, if other th	nan the date of filing: October 27, 2006 . (OPTIONAL)
a effective date is listed, the date n	nust be specific and cannot be more than five business days prior
90 days after the date of filing.)	•
DECLUDED CLCMATINE.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Patri	ik H. Noraneky
Patri	member or an authorized representative of a member.
Signature of a	member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution
Signature of a  (In accordance of this documer	member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution and the constitutes an affirmation under the penalties of perjury stated herein are true.
Signature of a (In accordance of this documer	with section 608.408(3), Florida Statutes, the execution nt constitutes an affirmation under the penalties of perjury stated herein are true.)

Filing Fees:

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

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

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