

607000003422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

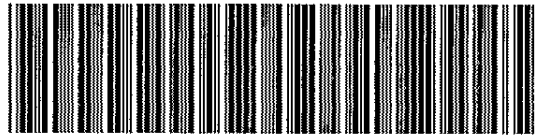
(Business Entity Name)

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DEPT. OF REVENUE
DIVISION OF CORPORATE & BUSINESS SERVICES
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
OFFICE OF THE CLERK
TALLAHASSEE, FLORIDA

607-3422
gh

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: TRACY SPEAR

DATE: 01/10/07

REF. #: 000409.62534

CORP. NAME: ACCURATE MACHINE & TOOLS, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

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TALLAHASSEE, FLORIDA

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STATE FEES PREPAID WITH CHECK# 519783 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
ACCURATE MACHINE & TOOL, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is **ACCURATE MACHINE & TOOL, LLC**

ARTICLE II: - Address

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

5124 Trademark Drive
Raleigh, NC 27610

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

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

**CorpDirect Agents, Inc.
515 East Park Avenue
Tallahassee, FL 32301**

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.

CorpDirect Agents, Inc., Registered Agent

By: *Aimee K. Harris* - Asst. Sec.

ARTICLE IV: - Management

☒ The Limited Liability Company is to be managed by one Manager or more Managers and is, therefore, a manager - managed company.

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

The name and address of each Manager is as follows:

MGR

Sunbelt Diversified Enterprises, LLC
1221 Brickell Avenue
Suite 2660
Miami, FL 33131

/s/ Jahan S. Islami

Jahan S. Islami, Authorized Signer

(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.)

Jahan S. Islami

Typed or printed name of signee

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