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COVER LETTER

TO:

Registration Section

Division of Corpora	tions			
SUBJECT: Centro		Liability Company)	up, LLC	
The enclosed Articles of Org	anization and fee(s) are sub	mitted for filing.		
Please return all corresponde	nce concerning this matter t	to the following:		
Jos	eph R M	erry Jr	·	
Centra	al Florid	a IT Gr	oup, LLC	
83	30 Stet	— 1	eet	
		(Address)	· · · · · · · · · · · · · · · · · · ·	
0	-lando,	FL 3280	PC	
For further information concernation concern	erning this matter, please ca	late and Zip Code) Il: (Area Code & Daytime Tel	SECRETARY AT STATE OF Number 1 - 4.3	12.0
Enclosed is a check for the			: 43 CRIDA	
\$125.00 Filing Fee	ertificate 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)	
Ro D P.	tailing Address egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center C Tallahassee, FL 32301	s	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Central Florida IIT Group, 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:
830 Stetson St. 127 West Fourbonks Ave Orlando, Fl. 32804 Winter Park, Fl. 32780
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:
Florida street address (P.O. Box NOT acceptable) Oclawdo FL 32804 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
Registered Agent's Signature (REQUIREI)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Joseph R Meny Jr 830 Stetson St. Orlando, FC 32804
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be to or 90 days after the date of filing.)	late of filing: (OPTIONAL) specific and cannot be more than five business days prior
(In accordance with sect of this document constituent that the facts stated here.)	or an authorized representative of a member. FOR JAPR - 9 PH 13 SECRE TARY OF STARY OF STAR

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)