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ACCOUNT NO. : 072100000032

REFERENCE: 931184

AUTHORIZATION :

COST LIMIT :

ORDER DATE: June 4, 2007

ORDER TIME : 1:24 PM

ORDER NO. : 931184-005

CUSTOMER NO: 4300239

DOMESTIC FILING

NAME: MULTILAYER WORLDWIDE

ENTERPRISES LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	PRISES LLC
MULTILAYER WORLDWIDE ENTER	PRISES LLC
(Must end with the words "Limited Liability Company, "Limited	
AMMYCE	E. 6.
ARTICLE II - Address: The mailing address and street address of the mail	winel office of the Limited Liebility Co. Francisco
The mailing address and street address of the prin	icipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
37 East Street	37 East Street
Winchester, MA 01890	Winchester, MA 01890
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration. Corporation Service Com	gistered agent are:
1201 Hays Street	
	ess (P.O. Box <u>NOT</u> acceptable)
Tallahassee	FL 32301
City, State, and	d Zip
liability company at the place designated in thi registered agent and agree to act in this capacity. statutes relating to the proper and complete perf accept the obligations of my position as registe	scept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S The ather Chapman

(CONTINUED) Page 1 of 2

: Medhu Chaman Registered Agent's Signature (REQUIRED) as its agent

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	MARTIN J. WILHEIM 387 South Washington Drive Sarasota, FL 34236
(Use attachment if necessary)	
	the date of filing: (OPTION st be specific and cannot be more than five business da
days after the date of filing.) REQUIRED SIGNATURE:	2

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.)

By: MARTIN J. WILHEIM

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)