## 15700074545

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
	•			
(Document Number)				
	,			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		j		
		ł		
22C		į		

Office Use Only



900105774779

07/18/07--01022--008 \*\*130.00

07 JUL 18 PH 2: 38

· TO:

TO:	Registration Se Division of Cor		•	
SUBJ	ECT:	Always On Targe (Name of Limite	t , LLC d Liability Company)	
The er	nclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please	return all correspo	ndence concerning this matte	er to the following:	
		Richard M Mar	kheim (Name of Person)	
			(Firm/Company)	
		PO Box 78398	4 (Address)	
		Winter Garde (City	n FL 34778 //State and Zip Code)	
For fu	rther information c	oncerning this matter, please	call:	
Ric	hard M Mar (Name)	kheim of Person)	at ()6567/ (Area Code & Daytime Tele	153 phone Number)
	_	the following amount:  (X\$130.00 Filing Fee & Certificate 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)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:						
Always On Target LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")						
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:						
Principal Office Address:	Mailing Address:					
3038 No John Young Pkwy #19 Orlando FL 32804	PO Box 783984 Winter Garden FL 34778					
The name and the Florida street address of the  Michael Oli Name  203 East L  Florida street a  Orlando  City, State  Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete p	e registered agent are:  Brien  No. 10 10 15 16 17 15 16 16 16 16 16 16 16 16 16 16 16 16 16	11				

Registered Agent's Signature (REQUIRED)

(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	Richard M Markheim 17717 Deer Isle Cr Winter Garden FL 34787			
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the da	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior			
REQUIRED SIGNATURE:				
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.)				
Richard Typed	M Markheim I or printed name of signee			
Filing Fees:				
\$125 M Filing Fee for Articles of Organiz	ution and Decimation			

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