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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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07/24/07-01043--017 **78.75

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SECRETARY OF STATE

Office Use Only

COVER LETTER

TO:

Registration Section

Division of	Corporations
SUBJECT:	NETMARK USA, LLC
	(Name of Limited Liability Company)
The enclosed Article	of Organization and fee(s) are submitted for filing.
Picase return all corr	espondence concerning this matter to the following:
	Michelle Lewis
	(Name of Person)
	c/o Allen Corporation Supply Co., Inc.
<u> </u>	(Firm/Company)
	10440 Pioneer Blvd., Suite 8
 	(Address)
	Santa Fe Springs, CA 90670
•	(City/State and Zip Code)
For further informati	on concerning this matter, please call:
Michelle Lewis	at (562) 906-1635
(N	me of Person) (Area Code & Daytime Telephone Number)
Enclosed is a checi	for the following amount:
3125.00 Filing Fe	E Status Filing Fee & ✓\$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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 Circle Tallahassee, FL 32301



10440 PIONEER BLVD., SUITE 8 SANTA FE SPRINGS, CA 90670 562.906.1635 FAX 562.906.1645 www.allencorpsupply.com

July 27, 2007

FLORIDA DEPARTMENT OF STATE Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301 Atten: Deborah Bruce

RE: NETMARK USA, LLC

Please file the enclosed Articles of Organization for the company named above, and forward a **certified copy** of the Articles to the letterhead address. Please process this request on an **Expedited Basis**.

Also enclosed is a check payable to Florida Department of State for the additional balance due of \$76.25 to cover all costs associated with filing this request, and a Federal Express air bill for you use. Also please attach a statement of all your charges.

Do not hesitate to contact me with any questions.

Sincerely.

Michelle Lewis

O7 JUL 30 PM 4: 15
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2007

MICHELLE LEWIS % ALLEN CORPORATION SUPPLY CO., INC. 10440 PIONEER BLVD., SUITE 8 SANTA FE SPRINGS, CA 90670

SUBJECT: NETMARK USA, LLC Ref. Number: W07000035694



We have received your document for NETMARK USA, LLC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$76.25.

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Document Specialist

Letter Number: 407A00046478

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nar	ne:				
The name of the Li	imited Liability Comp	pany is:			
	NETMAR	K USA, LLC	,		
(Must end with the words	"Limited Liability Compan	ny, "Limited Company" or their abbrevia	tion "LLC," or "L.C.,")	• •	
ARTICLE II - Ad	dress:				
The mailing address	s and street address c	of the principal office of the Lin	mited Liability Con	npany is:	
Principal Office A	ddress:	Mailing Address:			
6981 NW 109th Ave.	,	6981 NW 109th Ave.			
Miami, FL 33178		Miami, FL 33178			
(The Limited Liability Co		gistered Office, & Registered wn Registered Agent. You must designat			
The name and the I	Florida street address	of the registered agent are:		JUL 30	
	Oscar	Vargas Sanchez		30 30 30 30	
		Name		<u>~</u>	रीकटीज्ये हैं
	6981 NW 109th Ave.			Ers R	2 E S
	Florida street address (P.O. Box NOT acceptal		able)	STATE ORI	
	Miami,	FL 33178		Σ Σγή συ	
	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 (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: Title: "MGR" = Manager "MGRM" = Managing Member MGRM Oscar Vargas Sanchez 6981 NW 109th Ave

Miami, FL 33178

TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Oscar Vargas Sanchez
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)