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2000 JAN 29 AM II: 12 SECRETARY OF STATE ALLAHASSEE, FLORIDA

T. CLINE

JAN 30 2008

**EXAMINER** 

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJI	ECT: AURONA TECHNULUGIES, LLC (Name of Limited Liability Company)
The en	aclosed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	NATE BAZINET
	(Name of Person)
	AURORA TECHNOLOGIES (Firm/Company)
	(Firm/Company)
	9950 NE 118TH TERC
	(Address)
	BNONSON, FL. 32621
	(City/State and Zip Code)
	ALE SEL
For fur	rther information concerning this matter, please call:
	rther information concerning this matter, please call:  ATE BALLNET  at (352) 339-5791
	(Name of Person) at (352) 339-5791 ASSET 29 (Area Code & Daytime Telephone Number) OF COLUMN TELEPHONE TELEPHONE Number) OF COLUMN TELEPHONE TELEPHONE Number) OF COLUMN TELEPHONE TELEPHO
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	
	3.00 Filing Fee \$\int \text{\$130.00 Filing Fee & \$\int \text{\$155.00 Filing Fee & }\text{\$160.00 Filing Fee, }\text{\$Certificate of Status & \$\text{\$Certified Copy}\$ (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	is:		
AURORA TECHNOLOGIES,  (Must end with the words "Limited Lia	LLC	<del></del>	
ARTICLE II - Address: The mailing address and street address of the		bility Comp	any is:
Principal Office Address:	Mailing Address:		
9950 NE 118TH TEIR BRONSON, FL 32621	SAME		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registeress entity with an active Florida registration.)	gistered Agent. You must designate an individ	tual or another	2008. IAM 29
The name and the Florida street address of the		RY OF STATE SEE, FLORIDA	
NATE BAZINET Nan		ATE RIDA	2000 1011 20 01
	address (P.O. Box <u>NOT</u> acceptable)		
BRONSON, FL City, State	FL 3よ6ン/ e, and Zip		
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac	to accept service of process for the a in this certificate, I hereby accept the	e appointmen	nt as

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)

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	DAVID BAZINET  2650 SZND AVE  VENO BEACH, FL 32966
M 612M	NATE BAZINET  9950 NE 11871+ TERR
	Bnowson, FL. 32621
	TALLARA ALLARA
	ASSEE C
Use attachment if necessary)	F STATE FLORID
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)	e date of filing:(OPTIO) be specific and cannot be more than five business d

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.)

MATE BAZINET

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)