

W8 0000 77056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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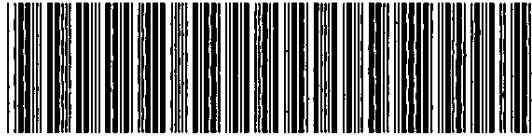
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2008 AUG 11 PM 1:52  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

T. CLINE

AUG 12 2008

EXAMINER

*John B. Crowther*

ATTORNEY AT LAW  
279 EAST GRAVES AVENUE  
ORANGE CITY, FLORIDA 32763  
TEL. (386) 775-6179  
FAX (386) 775-7908

August 7, 2008

Secretary of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Re: Articles of Organization (FIBER LASER SYSTEMS, LLC).

Ladies/Gentlemen:

Enclosed please find the original and ONE (1) copy of the Articles of Organization for the above-referenced corporation.

It would be most appreciated if you would file said articles and return the photocopy (not certified copy) thereof to this office with the date of filing stamped thereon.

Also enclosed please find my office check in the amount of \$125.00 broken down as follows: Filing fee (\$100.00) and registered agent fee (\$25.00).

Thanking you, and should you have any questions please do not hesitate to contact me.

Very truly yours,

*John E. Crowther*  
John E. Crowther

JEC:  
Encl:as

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**

**FOR**

**FIBER LASER SYSTEMS, LLC.**

THE UNDERSIGNED, for the purpose of forming a Limited Liability Company under the provisions of Chapter 608 of the Florida Statutes, does hereby adopt the following Articles of Organization:

**ARTICLE I**

**Name**

The name of the Limited Liability Company is FIBER LASER SYSTEMS, LLC.

**ARTICLE II**

**Address**

The address of the principal office of the Limited Liability Company is 121 Alexandra Woods Drive, DeBary, Florida 32713.

**ARTICLE III**

**Purpose**

The Limited Liability Company may transact any and all business for which Limited Liability Companies may be lawfully organized under the Laws of the State of Florida.

**ARTICLE IV**

**Registered Agent**

The name and Florida street address of the registered agent is Robert Holland, 121 Alexandra Woods Drive, DeBary, Florida 32713.

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 that 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, Florida Statutes.

  
Registered Agent

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ARTICLE V

Managing Member

The name and address of the Managing Member is as follows:


Title

Name and Address

MGRM

ROBERT HOLLAND  
121 Alexandra Woods Drive  
DeBary, Florida 32713

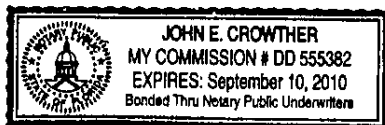
DATED: August 6, 2008.

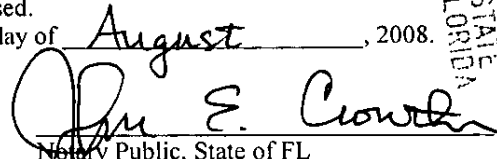
  
Robert Holland  
Managing Member

STATE OF FLORIDA  
COUNTY OF VOLUSIA

BEFORE ME, the undersigned authority, an officer duly authorized in the State and County aforesaid to administer oaths and take acknowledgments, personally appeared ROBERT HOLLAND, who is personally known to me or who produced Personally known as identification, and they acknowledged that they executed the same for the purposes therein expressed.

WITNESS my hand and official seal this 6th day of August, 2008.



  
Notary Public, State of FL  
My commission expires:

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STATE  
FLORIDA