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W08-37652



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS
AUG 20 2008
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOTUS COMPUTER WORKS, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KOSTAS PLATO PAPADAKIS
(Name of Person)

(Firm/Company)

1402 TIARA LANE

(Address)

TARPON SPRINGS, FL 34689-2946
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

KOSTAS PLATO PAPADAKIS at (727) 945-9350
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$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 Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 11, 2008

KOSTAS PLATO PAPADAKIS
1402 TIARA LANE
TARPON SPRINGS, FL 34689-2946

SUBJECT: LOTUS COMPUTER WORKS, LLC
Ref. Number: W08000037652

We have received your document for LOTUS COMPUTER WORKS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

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) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 708A00045370

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LOTUS COMPUTER WORKS, 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:

1402 TIARA LANE
TARPON SPRINGS, FLORIDA
34689-2946

Mailing Address:

1402 TIARA LANE
TARPON SPRINGS, FLORIDA
34689-2946

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TALLAHASSEE, FLORIDA

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

KOSTAS PLATO PAPADAKIS

Name
1402 TIARA LANE
TARPON SPRINGS, FL 34689-2946

Florida street address (P.O. Box **NOT** acceptable)

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.

Kostas Plato Papadakis

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Name and Address:

MGR

KOSTAS PLATO PAPADAKIS

1402 TIARA LANE

TARPON SPRINGS, FL 34689-2946

MGRM

JUDY PAPADAKIS

1402 TIARA LANE

TARPON SPRINGS, FL 34689-2946

(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:

Kostas Plato Papadakis

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.)

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)