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COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Strategic Technologies	International, LLC
	ted Liability Company)
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this made	tter to the following:
John W. Hendricks	
	(Name of Person)
Strategic Technologies Intl	
	(Firm/Company)
367 S Shore Dr	
	(Address)
Sarasota, FL 34234	
(Ci	ty/State and Zip Code)
For further information concerning this matter, pleas	e call:
John Hendricks	at (941) 685-0223 (Area Code & Daytime Telephone Number)
(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	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (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



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Strategic Technologies International, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

	ATMORRANGE A MORRE & MANAGE	
Strategic Technologies Intl	Strategic Technologies Intl	
367 S Shore Dr	367 S Shore Dr	
Sarasota, FL 34234	Sarasota, FL 34234	

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:

John W.	Hendricks
	Name
367 S Sh	ore Dr
	Florida street address (P.O. Box NOT acceptable)
Sarasota	, FL 342234 _{FL}
	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

FILED

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

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

SIERE IARY IL SIA

<u>Title:</u> "MGR" = Manager	Name and Address:	TALLAHASSEE.
"MGRM" = Managing Membe	r	
MGRM	John W. Hendricks	
	367 S Shore Dr	
	Sarasota, FL 34234	
·· ···		
		
		
·	***************************************	
		
(Use attachment if necessary)		
`		
CLE V: Effective date, if other the effective date is listed, the date is 0 days after the date of filing.)	nust be specific and cannot be more tha	(OPTIONAL) n five business days prior
REQUIRED SIGNATURE:		
100	In W. Lent	<i>1</i>
Signature of a	member or an authorized representative of a	member.
(Im accordance	with section 608.408(3), Florida Statutes, the ex	a vution

John W. Hendricks

that the facts stated herein are true.)

Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury

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)