

L08000095225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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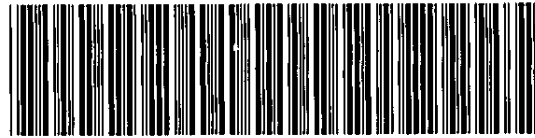
(Business Entity Name)

(Document Number)

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08 OCT - 7 PM 3:44

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

08 OCT - 7 AM 8:45

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

10/6/08

B. KOHR

OCT - 8 2008

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

EFFECTIVE DATE 10/6/08

FILING COVER SHEET
ACCT. #FCA-14

FILE

FILED
OCT -7 AM 8:45
TALLAHASSEE, FLORIDA

CONTACT: KATIE WONSCH

DATE: 10/07/08

REF. #: 000672.94104

*Please note effective
date! *

CORP. NAME: SAFTRON MANUFACTURING, LLC

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 527860 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

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| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input checked="" type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

EFFECTIVE DATE 10/6/08

ARTICLES OF ORGANIZATION
OF
SAFTRON MANUFACTURING, LLC

FILED
08 OCT -7 AM 8:45
TALLAHASSEE, FLORIDA

1. Name. The name of this limited liability company is **SAFTRON MANUFACTURING, LLC** (the "Company"), and it shall be formed as a limited liability company under Chapter 608 of the laws of the State of Florida.

2. Duration. The Company's existence shall be effective as of October 6, 2008 and shall thereafter be perpetual.

3. Purpose. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.

4. Place of Principal Office. The mailing and street address of the Company's principal office is **2100 Constitution Blvd., Sarasota, Florida 34231.**

5. Registered Agent and Office. The name of the initial registered agent of the Company is **F&L Corp.** The street address of the initial registered agent of the Company is **One Independent Drive, Suite 1300, Jacksonville, FL 32202.**

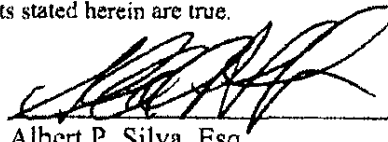
6. Management of the Company. The management of the Company shall be vested in the managers of the Company. The initial manager of the Company is **Cara Radovich.**

7. Operating Agreement. The members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

8. Additional Members. Additional members to the Company may be admitted, but only upon the unanimous agreement of the members, or as otherwise provided in accordance with the Operating Agreement of the Company.

The undersigned executed these Articles of Organization on the 6th day of October, 2008.

In accordance with Section 608.408(3), *Florida Statutes*, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



Albert P. Silva, Esq.
Authorized Representative of Member

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within-named Company, at the place designated herein, and being familiar with the obligations of that position, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

F&L CORP.

By: 

Albert P. Silva, Vice President

Dated: October 6, 2008