

### Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CSH SERVICES, LLC Account Number : I20070000160

: (800)494-3124 Phone Fax Number

: (561)455-9885

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### LIFTLOC, LLC

Certificate of Status	0
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Help



# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608 and/or 621,F.S.

<u>ARTICLE I NAME</u>

The name of the Limited Liability Company is:

LIFTLOC, LLC

ARTICLE II ADDRESS

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

12650 7TH ST E

TREASURE ISLAND, FLORIDA 33706

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

DAWN NEMETHY 12650 7TH ST E

TREASURE ISLAND, FLORIDA 33706

Having been named as registered agent 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.

DAWN NEMETHY / Registered Agent's signature



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PAGE 2

LIFTLOC, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more manager and is, therefore, a Manager Managed Company.

#### ARTICLE V MANAGERS (optional)

MANAGER
PETER NEMETHY
12650 7TH ST E
TREASURE ISLAND, FLORIDA 33706

MANAGER
DAWN NEMETHY
12650 7TH ST E
TREASURE ISLAND, FLORIDA 33706

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SECRETARY OF STATE

Signature of a member of an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this accument constitutes an affirmation under the penalties of periory that the facts stated herein are true.

PETER NEMETHY

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