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(Reques	tor's Name)	
(Addres	s)	
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(City/Sta	ate/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Busine	ss Entity Nam	ne)
(Docum	ent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing	g Officer:	

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J. BRYAN

FEB - 6 2009

**EXAMINER** 

Vezina, Lawrence d Pisci Requester's Name 413 E. Park Avenue Address  Tall 224-102 City/State/Zip Phone #	telli " 205 Rita	·
	-	Office Use Only
CORPORATION NAME(S) & DOCU	MENT NUMBER(S),	(if known):
1. InventeK LC (Corporation Name)	(Document #)	
2(Corporation Name)	(Document #)	
3. (Corporation Name)	(Document #)	
4. (Corporation Name)	(Document #)	
Walk in Pick up time _		Certified Copy
☐ Mail out ☐ Will wait	Photocopy	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of Change of Regi Dissolution/Wi Merger	
OTHER FILINGS	REGISTRATION/	<u>QUALIFICATION</u>
Annual Report Fictitious Name	Foreign Limited Partner Reinstatement Trademark Other	rship
CR2E031(7/97)		Examiner's Initials

## **COVER LETTER**

	egistration Section ivision of Corporations		
QUB IFCT	. Inventek, LLC		
SUBJECT	(Name of Limited	Liability Compa	ny)
The enclose	ed Articles of Organization and fee(s) are su	bmitted for filing	
_	rn all correspondence concerning this matter	_	
	ffrey V. Nelson		•
<u> </u>	<del></del>	lame of Person)	
Ve	ezina, Lawrence & Piscitelli	, P.A.	
		irm/Company)	<del></del>
12	21 Alhambra Plaza, Suite 16	604	
_		(Address)	
Co	oral Gables, Florida 33134		
	(City/s	State and Zip Code)	)
For further	information concerning this matter, please of	all:	
Jeffrey	V. Nelson	at305	443-2043
	(Name of Person)		& Daytime Telephone Number)
Enclosed i	is a check for the following amount:		
□\$125.00 I	Filing Fee \$\int_\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division Clifton Bi 2661 Exe	ourier Address on Section of Corporations uilding cutive Center Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Inventek, LLC	
(Must end with the words "Limited Lis	ability 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:	Mailing Address:
5355 Stirling Road, Suite E	5355 Stirling Road, Suite E
Davie, Florida 33314	Davle, Florida 33314
business entity with an active Florida registration.)  The name and the Florida street address of the	e registered agent are:
Edward M. Richard	ls
Nan	ne
5355 Stirling Road	, Suite E
Florida street :	address (P.O. Box <u>NOT</u> acceptable)
Davie, Florida 333	14 <sub>FL</sub>
City, State	c, and Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S

Registered Agent's signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

, . , , , ,

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	er
MGRM	Edward M. Richards
	5355 Stirling Road, Suite E
	Davie, Florida 33314
<del>/</del>	
(Use attachment if necessary)	
T.F.V. Effective date, if other the	han the date of filing: (OPTIONAL)
	must be specific and cannot be more than five business days prior
	·
REQUIRED SIGNATURE:	
	$-fM$ $\alpha$ $(A + A)$

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.)

Edward M. Richards

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)