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EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJ	PHAZER TECHNOLOGIES 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:			
	ELIOT GITTELMACHER		
	(Name of Person)		
	PHAZER TECHNOLOGIES LLC		
	(Firm/Company)		
	3492 S OCEAN BLUP		
•	PALM BEACH FL 33480		
	(City/State and Zip Code)		
For further information concerning this matter, please call:  LORI SHELTER  561 826 7626  LUCT GITTELM AMER  at (561) 585 6461  (Name of Person)  (Area Code & Daytime Telephone Number)			
	(Mail Colo le Dayante Telephone Tunice)		
Enclosed is a check for the following amount:			
<b>\$12</b> 5	5.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \Bigcup \\$155.00 Filing Fee & \Bigcup \\$160.00 Filing Fee,  Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy  (additional copy is enclosed)		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street/Conrier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•
ARTICLE I - Name: The name of the Limited Liability Company is:
· · · ·
PHAZER TECHNOLOGIES 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: Mailing Address:
1489 WEST PALMETTO PANK RP 3492 S. OCEAN BLYD BOCA RATON FL 33486 PALM BEACH FL 3348
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:
ELIOT GITTELMACHER
Name
3492 S. OCEAN BLYD
Florida street address (P.O. Box NOT acceptable)
PALM BEACH EL 33480
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 Agenc's Signature (REQUIRED)  OF CORPORAL  (CONTINUED)  CONTINUED)
(CONTINUED)

## 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 Member (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:** 

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.)

> ELIOT GITTELM ACHER 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)

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