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## Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 222-1092 Eax Number : (850)878-5368

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Optannex, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125,00

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**8**-2009 JUL

**EXAMINER** 

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
The fame of the Employ Statemy Company	
Optannex, LLC	
(Must and with the words "Limited L	Jabilly Company, "L. L. C.," or "LLC")
ARTICLE II - Address:	
The mailing address and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
475 CENTRAL AVENUE, SLITE 305	475 CENTRAL AVENUE, SUITE 305
SY, PETERSBURG, FLORIDA 33701	ST. PETERSBURG, FLORIDA \$3701
(The Limited Liability Company council serve us its own R business scritty with an active Florida registration)  The name and the Florida street address of the Chris Sand  Chris Sand  Sanders Law Group Florida street  St. Petersbit City, St.	the registered agent are:

liability company at the place designated in this certificate, I hereby accept the appoinment 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

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	R. PATRICK MARSTON 475 CENTRAL AVENUE, SUITE 305 ST. PETERSBURG, FLORIDA 33701	
<u></u>		
	一	
	ETHRY OF STATE OF STA	
(Use attachment if necessary)	STATE OF THE	
ARTICLE V: Effective date, if other than the de (If an effective date is listed, the date must be s to or 90 days after the date of filing.)		
REQUIRED SIGNATURE:		
Signature of a member or an authorized representative of a member.		

R. Patrick Marston

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Summer, the execution 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

that the facts stated herein are true.)

- 5 30,00 Certified Copy (Optional)
- \$ 5,00 Certificate of Status (Optional)