# 109000069466

· (Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
	cument Number)	<del></del> .
,		
Certified Copies	Certificates	of Status !
Special Instructions to I	Filing Officer:	
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		·





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GO JUL 20 PM 1: 15 SECRETARY OF STATE JALLAHASSEE, FLORID

**B. KOHR** 

JUL 2 2 2009

**EXAMINER** 

# **COVER LETTER**

Division of C	Corporations	•		
SUBJECT:	IV.	ITREDEX	K, LLC	
	Name of Limit	ed Liability C	ompany	
The enclosed Articles	of Organization and fee(s) are	submitted for	filing.	,
Please return all corres	spondence concerning this matt	ter to the follo	wing:	09 JU
	(	Ozkan Erde	∍m	2
		Name of Perso	מו	SSS
	1	ntredex, Ll		
		Firm/Compan		) only
	3441	Deer Oak	Circle	
		Address		•
	Ov	iedo, FL 3	2766	· · · · · · · · · · · · · · · · · · ·
	Cit	y/State and Zip	Code	
	ozka	nme@gm	ail.com	
•	E-mail address: (to be used to	for future annua	il report notifica	tion) <sub>.</sub>
For further information	n concerning this matter, please	e call:		
	kan Erdem	_ at (407		366-5299
Name	e of Person	Area	Code & Daytim	ne Telephone Number
Enclosed is a check	for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certifie	Filing Fee & d Copy	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Reg Div Clif 266	et/Courier Ad istration Section ision of Corpor ton Building I Executive Co ahassee, FL 32	n rations enter Circle

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
	EX, LLC.
(Must end with the words "Limited"	Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3441 Deer Oak Circle Oviedo, FL 32766	3441 Deer Oak Circle Oviedo, FL 32766
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	rered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another :
The name and the Florida street address of	
Ozka	an Erdem A 是
N	an Erdem FIL 20
3441 De	er Oak Circle
Florida street address	(P.O. Box NOT acceptable)
Oviedo, FL 32766	(P.O. Box NOT acceptable)  6 FL
	ate, and Zip
Having been named as registered agent and	d to accept service of process for the above stated limited

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 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:

"MGR" = Mar		Name and Address:
	nager Ianaging Member	
	ianaging Memoer	
MGR	<del></del>	Ozkan Erdem
		3441 Deer Oak Circle
		Oviedo, FL 32766
· · · · ·	<del></del>	
(Use attachmer	nt if necessary)	
•	•	data of filing. (OPTION
LE V: Effectiv	ve date, if other than the	date of filing:
LE V: Effective date is	ve date, if other than the	date of filing: (OPTION e specific and cannot be more than five business da
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)	date of filing: (OPTION e specific and cannot be more than five business da
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LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)	date of filing: (OPTION e specific and cannot be more than five business da
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a member (In accordance with see	e specific and cannot be more than five business day  function  or an authorized representative of a member.  stion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury
LE V: Effective date is days after the	ve date, if other than the listed, the date must be date of filing.)  SIGNATURE:  Signature of a member of this document const that the facts stated her	e specific and cannot be more than five business day  fraction for an authorized representative of a member.  Ition 603.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury ein are true.)
LE V: Effective date is days after the	Signature of a member of this document const that the facts stated her	e specific and cannot be more than five business day  function  or an authorized representative of a member.  stion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)