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BY INVISION OF CAREA
TALLAGO SSEE, FLORIDA

DO DEC 28 MII: 46

D. BRUCE
DEC 2 8 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TEMOS INTERNATIONAL 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:
VICTORIA DARAMOLA Name of Person
TEMOJ INTERNATIONAL LLC Finn/Company
1346-A SOUTH ADAMS ST. 38
TALLAHASSEE, FL 32301 25 City/State and Zip Code
City/State and Zip Code Daramola O embargmai . (sm E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
VICTORIA PARAMOLA at (850) 222 1714 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Street/Courier Address Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 Li	mited Liability Company is:		
TEMO-	3 INTERNATION STATEMENT ST		
ARTICLE II - Ad The mailing addres	dress: s and street address of the pri	incipal office of the Limited	Liability Company is:
Principal Office A	ddress:	Mailing Address:	
1346-A	SOUTH ADAMS ST. SEE, FL 32301	1346-A SOUTH ST. TALLAHA EL 3230	ADAMS SSEE L
(The Limited Liability Co business entity with an a	egistered Agent, Registered ompany cannot serve as its own Registeritive Florida registration.)	ered Agent. You must designate an in	dividual on another
The name and the F	Florida street address of the re	egistered agent are: DARAMOLA	DEC 28 AMI
	1346-A SOUTH Florida street address (P.O. TAHAHASSEE	 	AN III: 46
	City State an	rd Zin	

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)

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" = Manager "MGRM" = Managing Member	Name and Address:
MANAGER	VICTORIA DARAMOLA 1346-A SOUTH ADAMS ST. TALLAHASSEE, FL 32301
 	
(Has attachment if managery)	
90 days after the date of filing.)	e date of filing: (OPTIONAL) De specific and cannot be more than five business days price
ICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member	e date of filing:

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)