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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: AGENTS AND CORPORATIONS, INC Account Name

Account Number : I20010000112 Phone : (302)575~0875

: (302)575-0925 Fax Number

\*\*Enter the email address for this business entity to be used for fag annual report mailings. Enter only one email address please.\*

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## FLORIDA LIMITED LIABILITY CO.

## Interead.com LLC

Certificate of Status	0
Certified Copy	0
Page Count	et 2
Estimated Charge	\$125.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Interead.com LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1750 N Bayshore Dr Apt 4201, Miami, FL 33132.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's

Signature:

The name and the Florida street address of the registered agent are

Agents and Corporations, Inc. 300 Fifth Avenue South Suite 101-330

Naples, FL 34102

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.

Agents and Corporations, Inc.

By: John L. Williams, Vice President

ARTICLE IV - Management (Check box if applicable.) [ ]

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.

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The initial Manager(s) of the Limited Liability Company shall

be:

**David Neil Jones** 

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.)

<u>David Neil Jones</u>
Typed or printed name of signee

Sandra Willumsen Tyralla

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.)

Sandra Willumsen Tyralla
Typed or printed name of signee

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SECRETARY OF STATE
AND ANASSEF, FLORIDA