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EFFECTIVE DATE 7/22/2010

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

B. KOHR

AUG - 2 2010

EXAMINER

EFFECTIVE DATE

TO: Registration Section Division of Corporations
TO: Registration Section Division of Corporations SUBJECT: Network Utility Enterprises Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing.
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kimberly T. PACK Wame of Person
Network Utility Enterprises, W
10711 Cory Lake Drive
Tampa, Fl. 33647 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status □\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

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

Street/Courier 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:

Network Utility Enterprises, LLC.
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
RTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
rincipal Office Address: Mailing Address:
10711 Corylake Drive 10711 Cory Lake Dr. Tampa, 71. 331047
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The Limited Liability Company cannot serve as its own Registered Agent. You must depend an anti-particular of another 7 22 2010 pusiness entity with an active Florida registration.)
The name and the Florida street address of the registered agent are
Kimberly D. PArl Name Name Name
Name 2 PAR
10.111 Cory Late 1
Florida street address (P.O. Box NOT petable)
City, State, and Zip
Having been named as registered agent and to accept service of plants of the above stated limited liability company at the place designated in this certificate, I have accept the appointment as registered agent and agree to act in this capacity. I further agree to all statutes relating to the proper and complete performance of my a statute of the proper and complete performance of my a statute of the proper and complete performance of my a statute of the proper and complete performance of my a statute of the above stated limited and the above stated limited and the accept service of proper and complete performance of my a statute of the above stated limited and the above stated limited and the above stated limited and the accept service of proper and complete performance of my a state of the above stated limited and the above stated limited and the accept service of proper and complete performance of my a state of the above stated limited and the accept service of proper and complete performance of my a state of the above stated limited and the accept service of proper and complete performance of my a state of the accept service of the above stated limited and the accept service of proper and the accept service of proper and the accept service of proper and complete performance of my accept service of the accept service
statutes relating to the proper and complete performance of my company and I am familiar with and accept the obligations of my position as registered agent as property for in Chapter 608, F.S
K: Park
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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Kimberly T. PARK 10/11 Cory Lake Dr. Tampa, 71. 33647
MGKW	Kenneth T. PARK 10711 Cory Lake Dr Tampa, 71. 33647
MOSM	Dana W. Burditt 1337 Old Dayton Pike HIX50N, TN 37343

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: (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.)

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)