

LI0000084565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

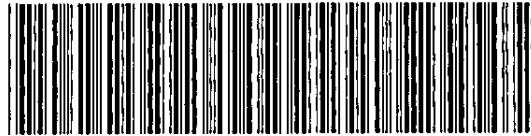
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**L. SELLERS**  
AUG 12 2010  
**EXAMINER**

Office Use Only



500183921885

08/12/10--01003--024 \*\*125.00

RECEIVED

10 AUG 12 AM 11:14

FILED

10 AUG 12 PM 12:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Sonotek Research  
Requester's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

656-5454  
Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Imson tek Computer Solutions  
(Corporation Name) (Document #)

2. UC  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in    ☐ Pick up time    ☒ Photocopy    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☒ Not for Profit  
☒ Limited Liability  
☒ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

ARTICLES OF ORGANIZATION

OF

INSOMTEK COMPUTER TECHNOLOGY SOLUTIONS, LLC

Pursuant to section 608.407, Florida Statutes, the undersigned hereby files these Articles of Organization as follows:

ARTICLE I - NAME

The name of the Limited Liability Company is:

INSOMTEK COMPUTER TECHNOLOGY SOLUTIONS, LLC

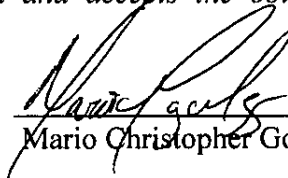
ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 100 N.E. 6 Avenue, Suite 220, Homestead, FL 33030.

ARTICLE III - REGISTERED AGENT


Mario Christopher Gonzalez  
100 N.E. 6 Avenue, Suite 220  
Homestead, FL 33030

*Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office; the undersigned hereby accepts said appointment and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent.*

  
\_\_\_\_\_  
Mario Christopher Gonzalez

ARTICLE V - DURATION

The period of duration for the Limited Liability Company is perpetual.

  
\_\_\_\_\_  
Mario Christopher Gonzalez, Authorized  
Representative and Registered Agent  
(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).

**FILED**  
10 AUG 12 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA