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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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10/27/10--01017--026 **160.00

Effective Date 10/29/10

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

OCT 2 8 2010

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: Quest Tracking Systems, 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:
Richard M. Cox
Name of Person
Quest Tracking Systems, LLC
Firm/Company
6816 Cedar Street
. Address
Wauwatosa, WI 53213
City/State and Zip Code
rmcsabre65@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard M. Cox _{at (} 414) 526-9507
Richard M. Cox at (414) 526-9507 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32301

Effective Date 10/22/10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Nam	e	2	1
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The name of the Limited Liability Company is:

Quest Tracking Systems, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
201South Biscayne Blvd	101 Lamplighter Drive
28th Floor	Marco Island, FL 34145
Miami, FL 33131	

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Derek J. Cox	
N	Name
101 Lamplight	er Drive
Florida stre	et address (P.O. Box NOT acceptable)
Marco Island	_{FL} 34145
Ci	ty, State, and Zip

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

SECRE LARY OF STATIONS
DIVISION OF CORPORATIONS

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Richard M. Cox	
	6816 Cedar Street Wauwatosa, WI 53213	
	_	
(Use attachment if necessary)	ı	
	ne date of filing: 10/22/2010	
fective date is listed, the date must days after the date of filing.)	be specific and cannot be more than fiv	⁄e business da

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Richard M. Cox

Typed or printed name of signee

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)

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