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COVER LETTER

TO: Registration Division of C		٧	,	, e
SURJECT: AD-V	EK Technologies	LLC		
		d Liability Comp	any	
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filin	g.	
Please return all corres	spondence concerning this matte	er to the following	g:	
<u>Prentice</u>	I. Robinson			
*		Name of Person		·
		,		
		Firm/Company		
5156 Za	chary Blvd			
		Address		
Pensacola	FL 32526			
5	·	/State and Zip Cod	e	
Prentice.R	obinson@gmail.com E-mail address: (to be used fo	or future annual rep	ort notification)	·
For further information	n concerning this matter, please	call:		
Prentice I. Robi	nson	at (850	450 6864	
Namo	e of Person		& Daytime Telepho	ne Number
Enclosed is a check	for the following amount:			
√ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional cop	py (y is enclosed) (160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton I 2661 Ex	ourier Address ion Section of Corporations Building secutive Center Circ	le

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
AD-VEK Technologies LLC	
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5156 Zachary Blvd Pensacola FL 32526	5156 Zachary Blvd Pensacola FL 32526
T GIISACOIA I E 32320	
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the representation Prentice I. Robinson	
Name	5差 25 三
5156 Zachary Blv	/d SA - E
	dress (P.O. Box NOT acceptable)
Pensacola	FL 32526
City, Sta	ate, and Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Memi	ber
MGRM	Prentice I. Robinson
-	5156 Zachary Blvd
	Pensacola FL 32526
	TOTAL COLORD
	
(Use attachment if necessary)
•	,
CLE V: Effective date, if other	than the date of filing: (OPTIONAL
effective date is listed, the date	e must be specific and cannot be more than five business days
0 days after the date of filing.)	
REQUIRED SIGNATURE	:
()	$\mathcal{L}(\mathcal{L}(\mathcal{L}))$
1 11	J. 11/1/a Mena

(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.)

Prentice I. Robinson

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)