L11000025967

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
. (Document Number)
Čertified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600196246046

03/01/11--01019--010 **155.00

2011 HAR -1 AM 10: 81

"SECRETARY OF STATE FAIT AHASSEE, FLORID!

C

C. LEWIS

MAR 2 2011

EXAMINER

en e	COVE	R LETTER	•
TO: Registration Se Division of Cor			r
SUBJECT: Voice		ed Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ndence concerning this matt	er to the following:	
Jose A. A	Alfonso		<u></u>
		Name of Person	
<u>VoiceWa</u>	re LLC		
		Firm/Company	
7438-B S	SW 48 Street		
·		Address	
Miami, Florid			<u> </u>
ia a vata ma G		y/State and Zip Code	
jasystems@	E-mail address: (to be used t	or future annual report notification)	
For further information c	oncerning this matter, please	e call:	
Jose A. Alfonso		at (786) 247-4408	
Name o	f Person	Area Code & Daytime Teleph	ione Number
Enclosed is a check for	the following amount:		
]\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status		\$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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICL	ĿΙ	- N	ame
-----	-----	----	-----	-----

The name of the Limited Liability Company is:

VoiceWare 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:

7438-B SW 48 Street

Miami, Florida 33155

7438-B SW 48 Street Miami, Florida 33155

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:

Luz D. Alfonso

Name

7855 SW 84th Court

Florida street address (P.O. Box NOT acceptable)

Miami

្ន 33143

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated 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

FILED

Title:	Name and Address:	TALLAHASSEE. F
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	Jose A. Alfonso	
		
		
(Use attachment if necessary)		
(Obe attachment if necessary)		
•		
LE V: Effective date, if other than the	e date of filing: 2/28/2011	(OPTIONAL)
ffective date is listed, the date must b	e date of filing: 2/28/2011 De specific and cannot be more t	. (OPTIONAL han five business days
LE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	e date of filing: 2/28/2011 De specific and cannot be more t	(OPTIONAL han five business days
ffective date is listed, the date must b	e date of filing: 2/28/2011 oe specific and cannot be more t	(OPTIONAL han five business days
ffective date is listed, the date must be days after the date of filing.)	e date of filing: 2/28/2011 pe specific and cannot be more t	(OPTIONAL han five business days
ffective date is listed, the date must b	e date of filing: 2/28/2011 oe specific and cannot be more t	(OPTIONAL han five business days
ffective date is listed, the date must be days after the date of filing.)	e date of filing: 2/28/2011 pe specific and cannot be more t	(OPTIONAL) han five business days
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more t	han five business days
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	e date of filing: 2/28/2011 pe specific and cannot be more to the specific and cannot be specifically and cannot be specific and cannot be specifi	han five business days
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a mem	pe specific and cannot be more to the specific and cannot be specifically and cannot be specific and cannot be specific and cannot be specific and cannot be specifically and cannot be specifically and cannot be specifically and cannot be specific and cannot be specifically and cannot be specific	han five business days f a member. on of this document
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a mem	per or an authorized representative of 8.408(3), Florida Statutes, the execution of the ponalties of perjury that the facts may on submitted in a document to the	f a member. on of this document stated herein are true.
ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a mem	er or an authorized representative of the smallies of perjury that the facts remains submitted in a document to the my as provided for in s.817.155, F.S.)	f a member. on of this document stated herein are true.

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Filing Fees: