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PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	e)
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Certified Copies	Certificates o	of Status
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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

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EXAMINER



COVER LETTER

TO: Registration Division of	n Section Corporations	
SURJECT: Con	nputech, LLC.	
		ited Liability Company
The enclosed Articles	s of Organization and fee(s) are	e submitted for filing.
Please return all corre	espondence concerning this ma	atter to the following:
Andrew	/ W. Miller	
		Name of Person
Compu	itech, LLC.	·
		Firm/Company
269 Ar	bor Drive West	
		Address
Palm Hart	oor, FL 34683	
		tty/State and Zip Code
andy@kj4	lfec.com	for future annual report notification)
	·	• ,
For further informatio	n concerning this matter, pleas	e call:
Andrew Miller		_ _{at (} 727) 222-0650
Nam	ne of Person	Area Code & Daytime Telephone Number
Enclosed is a check	for the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy 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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



RECEIVED

11 AUG 29 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 23, 2011

ANDREW MILLER 269 ARBOR DR WEST PALM HARBOR, FL 34683

SUBJECT: COMPUTECH, LLC Ref. Number: W11000043853

We have received your document for COMPUTECH, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 411A00019717

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:	
Computech, LLC. Te. (Must end with the words "Limited		L.C
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited Liabil	lity Company is:
Principal Office Address:	Mailing Address:	any company an
269 Arbor Drive West Palm Harbor, Fl. 34683	269 Arbor Drive West Palm Harbor, FI 34683	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		
The name and the Florida street address of	the registered agent are:	
Andrew W. Miller		
N	Vame	
269 Arbor Dr	ive West	
	et address (P.O. Box <u>NOT</u> acceptable)	
Palm Harbor	_{FL} 34683	
· Cit	ty, State, and Zip	
registered agent and agree to act in this cap statutes relating to the proper and comple	d in this certificate, I hereby accept the ap pacity. I further agree to comply with the	ppointment as provisions of all miliar with and
ala		AIG
	ignature (REQUIRED)	ISION OF CO
Page		ORPORI

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

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

MGR	Andrew W. Miller	
	269 Arbor Drive West	·
	Palm Harbor, FL 34683	
		"
		•
		·
		<u></u>
(Use attachment if necessary)		
	the date of filing:	(000000000

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. 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.)

Andrew W. Miller

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)

SECRETARY OF STATE ON SECRETARY OF CORPORATIONS