

5/16/12

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000131141 3)))



H120001311413ABCO

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

Resubmit
5/16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 16 AM 10:12

FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: systematics@cfi.RR.com

FLORIDA LIMITED LIABILITY CO.

Systematics Engineering Services LLC

Certificate of Status	1
Certified Copy	0
Page Count	02 04
Estimated Charge	\$130.00

RECEIVED

12 MAY 16 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDAJ. SAULSBERRY
EXAMINER

MAY 17 2012

H12000131141

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Systematics Engineering Services LLC**

ARTICLE II - Address

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

Principal Office Address:

4448 Middleburg Court

Orlando, FL 32818

Mailing Address:

4448 Middleburg Court

Orlando, FL 32818

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

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

Leslie W. Hardigree

Name

4448 Middleburg Court

(P.O. Box or Mail Drop Box NOT Acceptable)

Orlando, FL 32818

(City / State / Zip)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 16 AM 10:12

FILED

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.

Leslie W. Hardigree
Registered Agent's Signature - Leslie W. Hardigree

H12000131141

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Leslie W. Hardigree - 4448 Middleburg Court, Orlando, FL 32818

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Leslie W. Hardigree

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 16 AM 10:12

FILED

H12000131141