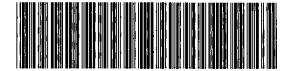
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EXAMINER



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COVER LETTER

TO:

Registration Section

Division of Corporations IR2Metrics, LLC SUBJECT: 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: **Jack McDonald** Name of Person IR2Metrics, LLC Firm/Company 10054 Glenmore Avenue Address Bradenton, Florida 34202 City/State and Zip Code jasu47@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jack McDonald Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$_\$130.00 Filing Fee & \$155.00 Filing Fee & **✓** \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGA	NIZATION FOR FI	LORIDA LIMITED LIABILI	TY COM	
ADDICTE L. N				M AHG 27
ARTICLE I - Name:			22 T	25
The name of the Limited I	Liability Company is:		発送	2.7
			in ear tal ear	-0
IR2Metrics, LLC				PH 29
. (Must end w	ith the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")		607 (A)
			E ST	گ
ARTICLE II - Address:				
The mailing address and s	street address of the pr	rincipal office of the Limited Li	ability Cor	npany is:
Principal Office Address	<u>s:</u>	Mailing Address:		
10054 Glenmore Avenue		10054 Clanmara Avanua		
Bradenton, Florida 34202	· · · · · · · · · · · · · · · · · · ·	10054 Glenmore Avenue Bradenton, Florida 34202		
Braderitori, Florida 34202	<u> </u>	Brademon, Florida 64202		
		<u> </u>		
ARTICLE III - Register (The Limited Liability Company of business entity with an active Flo	annot serve as its own Regis	d Office, & Registered Agent's stered Agent. You must designate an indivi	Signatur idual or anothe	e: er
The name and the Florida	street address of the	registered agent are:		
Jack	McDonald			
	Name			
100	54 Glenmore			
	Florida street ad	dress (P.O. Box NOT acceptable)		
Brade		_{EI} 34202		
		T D		
	City, St	ate, and Zip		
liability company at th registered agent and agre	e place designated in the to act in this capacit	accept service of process for the a this certificate, I hereby accept th ty. I further agree to comply with erformance of my duties, and I an	e appointn the provis	nent as ions of all
accept the obligations	of my position as regi	istered agent as provided for in C	hapter 608	, F.S

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:	200
"MGR" = Manager		530 2
"MGRM" = Managing Member		DID NO 21
MGR	Jack McDonald	
•	10054 Glenmore Avenue Bradenton, Florida 34202	- B
	Bradenion, Florida 34202	
		57
		
	-	
		•
		
		
(Lise attachment if necessary)		
	he date of filing: be specific and cannot be more that	
LE V: Effective date, if other than the frective date is listed, the date must		
LE V: Effective date, if other than the first that is listed, the date must days after the date of filing.)		
LE V: Effective date, if other than the frective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:		n five business da
LE V: Effective date, if other than the frective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section of constitutes an aftermation under a management of the constitutes and a managemen	be specific and cannot be more that	member. f this document ted herein are true.
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section of constitutes an aftermation unit am aware that any false info	aber or an authorized representative of a solution of the penalties of perjury that the facts state formation submitted in a document to the Deony as provided for in s.817.155, F.S.)	member. f this document ted herein are true.

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