# #112000111897

-				
(Red	questor's Name)			
( ) de	draga)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nar	me)		
`	•	,		
(Doc	cument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



900238765449



08/29/12--01017--013 \*\*130.00

ALLAHASSEE, FLORIDA

FILED

K.SALY EXAMINER AUG 30 2012

## . COVER LETTER

Division of Corpora				
SUBJECT: Quantum	Power Techn	ology LLC	>	
Sebelet.		d Liability Comp	· . · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of Orga	inization and fee(s) are s	uhmitted for filin	ıa	
_				
Please return all corresponder	ice concerning this matte	er to the following	3:	
Michelle Har	nchey			
	-	Name of Person		
		Firm/Company		
125 McCarty	Circle			
		Address		
Johns Creek, C	3Δ 30097			
domina Orccit, C	<del> </del>	/State and Zip Cod	e	
michelle@hancl	ney.com			
	mail address: (to be used fo		ort notification)	
For further information concer	ming this matter, please	call:		
Michelle Hanchey		at (678	, 200-2704	ļ
Name of Pers	on	Area Code	& Daytime Tel	lephone Number
Enclosed is a check for the	following amount:			
\$125.00 Filing Fee  \$13	_	T0155 00 E:::-	F 6	7¢160 00 Eiling Ess
	ertificate of Status	\$155.00 Filin Certified Co		\$160.00 Filing Fee, Certificate of Status &
		(additional cop	y is enclosed)	Certified Copy (additional copy is enclosed)
<u>Ma</u>	iling Address		ourier Address	s
	sistration Section is is is is is is is is is in a section of Corporations		ion Section of Corporation	18
P.O	. Box 6327	Clifton B	Building	
Tal	lahassee, FL 32314		ecutive Center see, FL 32301	Circie

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:



# Quantum Power Technology LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

**Principal Office Address:** 

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

Mailing Address:

76 S. Laura Street, Suite 590	125 McCarty Circle	
Jacksonville, FL 32202	Johns Creek, GA 30097	<del></del>
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	, ,	0
The name and the Florida street address of t	the registered agent are:	7 73
Charles McBurney		all F
N	ame	29 F
76 S. Laura Sti	reet, Suite 590	ANG R
Florida stree	et address (P.O. Box NOT acceptable)	70 w
Jacksonville,	<sub>FL</sub> 32202	<u> </u>
City	y, State, and Zip	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

## 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 "MGRM" = Managing Membe	Name and Address:
MGRM	Michelle Hanchey 125 McCarty Circle
	Johns Creek, GA 30097
<del></del>	
(Use attachment if necessary)	
	nan the date of filing: August 27, 2012 (OPTIONAL) nust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	•
Signature of a	Must 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.)

## Michelle Hanchey

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)