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SECRETARY OF STABLE DIVISION OF CORPORATIONS

2012 DEC 11 AM 10: 56

C. LEWIS

DEC 1 2 2012

EXAMINER

(850) 245-6051.

# **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: LOGIOW LLC

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:

Andrew	/ Aitken		,
	• • • • • • • • • • • • • • • • • • • •	Name of Person	
<del></del>		Firm/Company	<del> </del>
2101 C	ascade Road		
		Address	
Silver S	Spring, MD		
acaitken	@yahoo.com	ty/State and Zip Code for future annual report notification)	
For further information	concerning this matter, please	e call:	
Edward S.	Fryns	_ <sub>at (</sub> 561 ) 487-8	221
Name	of Person	Area Code & Daytime Tel-	<del></del>
Enclosed is a check f	or the following amount:		
1\$125.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & 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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company	is:	
LoGlow, LLC		
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
22711 Southwest 9th Street	2101 Cascade Road	
Boca Raton, FL 33433	Silver Spring, MD 20902	<del></del>
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)		
The name and the Florida street address of th	ne registered agent are:	3609 3141810 3181810
Edward S. Fryns		DEC DEC
Na	me	
22711 Southwest 9th Stree	et	B SPORATION AM IO:
Florida street	address (P.O. Box NOT acceptable)	<b>5</b> 34
Boca Rat	ton, <sub>FL</sub> 33433	ည် နှ
City,	, 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)

Page 1 of 2

MCD! - Manager	Name and Address:	2812 DEC 1 1
MGR" = Manager		
MGRM" = Managing Member		
lanaging Member	Edward S. Fryns	
	22711 Southwest 9th Street	
	Boca Raton, FL 33433	
<del></del>		
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Use attachment if necessary)		
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E V: Effective date, if other than a sective date is listed, the date may be 90 days after the date of filing.  EEOUIRED SIGNATURE:  Signature of a mem  (In accordance with section of constitutes an affirmation under the section of	ust be specific and cannot be model)  The property of the specific and cannot be model	a member.  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)