

L13000007004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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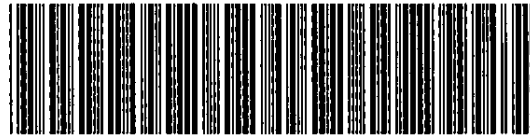
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2013 JAN 11 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE FL 32311

JAN 1 2013

D. BRUCE

(850) 245-6051.

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Office Products 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:

Jeffry A. Kunkel

Name of Person

Web Link Solutions Corp.

Firm/Company

10028 NW 57th Place

Address

Coral Springs, FL 33076

City/State and Zip Code

jkunkel@weblinkcorp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffry A. Kunkel

Name of Person

at 954 471-1392

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee  
payable to  
FL Sec of State

☐ \$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

FILED  
2013 JAN 11 PM 5:00  
SECRETARY OF STATE  
TALLAHASSEE FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Office Products LLC

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

## ARTICLE II - Address:

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

### Principal Office Address:

10028 NW 57th Place  
Coral Springs, FL 33076

### Mailing Address:

10028 NW 57th Place  
Coral Springs, FL 33076

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jeffrey A. Kunkel

Name

10028 NW 57th Place

Florida street address (P.O. Box **NOT** acceptable)

Coral Springs, FL 33076

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..*

X Jeffrey A. Kunkel

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2018 JAN 11 PM 5:10  
CLERK OF STATE  
TALLAHASSEE FL 32301

**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:**

MGRM

Web Link Solutions Corp.

10028 NW 57th Place

Coral Springs, FL 33076

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: January 1, 2008 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

X Jeffrey A. Kunkel  
Signature of a member or an authorized representative of a member.

*President & authorized representative  
of MGRM Web Link Solutions Corp.*

(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.)

Jeffrey A. Kunkel, President of MGRM Web Link Solutions Corp.

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)**

FILED  
2008 JAN 11 PM 5:00  
TAMU  
CLERK OF STATE  
ASSEMBLY  
FLORIDA