## 13000008557

(Requestor's Name)
(Address)
(Address)
(O't-10)-1-77(O-t
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
'JAN 1 6 2013
L. SELLERS

Office Use Only



900243426459

01/14/13--01054--016 \*\*130.00

13 JAN 11 PH 3: 28
RECREIART OF STATE

(850) 245-6051.

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: FPRKTECH L.L.C.  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:
FITZHUGH L. PATRICK
Name of Person
FPRKTECH L.L.C. Firm/Company
Firm/Company
2247 coach house blvd. unit 5
Address
ORLANDO, FL 32812 City/State and Zip Code
FITZ. PATRICK @ FPRKTECH. COM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
1 of further information concerning this matter, preuse can.
FITZHUGH PATRICK at (407) 860-5905  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee <b>№</b> \$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee,

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

Street/Courier Address

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certificate of Status &

(additional copy is enclosed)

Certified Copy

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

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

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

E:TS ...

**Mailing Address:** 

DOTTO TALL

FPRKTECH L.L.C.

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

ARTICLE I - Name:

ARTICLE II - Address:

**Principal Office Address:** 

business entity with an active Florida registration.)

The name of the Limited Liability Company is:

	1 1 1 1 1 1 1 1 1 1	AUGH (	<u> </u>	<u> </u>					
		Na	me						
	2247	Coach	house	blsd.	4 9	5			
		Florida street	address (P.O. 1	Box <u>NOT</u> acce	ptable)				
	ORL	AN DO	FL	37817	<u>_</u>				
		City,	State, and Zip						
Having been name liability compan registered agent a all statutes relati and accept the ob	ny at the place and agree to ng to the pro- ligations of the	ce designated a act in this cap oper and comp	in this certific pacity. I furti- plete perform registered a	cate, I hereby her agree to ance of my a gent as prov	y accep comply luties, a	ot the appo with the p and I am fa	intme provisi imilia	nt as ions r wit	of h
		(CONT Page 1	INUED) of2			TALLATURSE	34 24 41	12 128	Liver de
							of 31%	PH 3: 3	

<u>Fitle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
MGR	FITZHUEH L. PATRICK 2247 COACH HOUSE blue ORLANDO, FL. 32812
MERM	Randau T. Knight 2247 coach house bird. ORLANDO, FL. 32812
<del></del>	
Use attachment if necessary)	
LE V: Effective date, if other than the	ne date of filing: (OPTION st be specific and cannot be more than five busing

**REQUIRED SIGNATURE:** 

Signature of a 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.)

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)