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(Document Number)	_
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B. BOSTICK
FEB 2 0 2013
EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT.

Supreme Technology 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:

Petar Vukadin		
	Name of Person	_
Supreme Technolog	y LLC.	
	Firm/Company	
10371 38th Street N	orth	
	Address	TAL
Clearwater, FL 3376	2	3 FEI
	ity/State and Zip Code	
SupremeTechnologyLLC@	T	
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, pleas	e call:	M 12: 02
Petar Vukadin	_at (727) 5379846	02 NDA
Name of Person	Area Code & Daytime Telephone Num	ber
Enclosed is a check for the following amount:		
□\$125.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certifie	Filing Fee, cate of Status & cd Copy cal 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:				
Supreme Technology LLC.				
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")		_	
ARTICLE II - Address:				
The mailing address and street address of the pr	rincipal office of the Limited L	iability (Compa	ny is:
				
Principal Office Address:	Mailing Address:			
10371 38th Street North	10371 38th Street North			
Clearwater, FL 33762	Clearwater, FL 33762		_	
			-	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)				
The name and the Florida street address of the i	registered agent are:	The Art of	9	-
Petar Vukadin		j	70	(11)
Name		(2) 	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	
10371 38th Street North		FLORIDA	PM 12: 02	
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)	A		
Clearwa	ateր, FL 33762			
	ate, 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

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGR	Petar Vukadin
WGR	10371 38th Street North
	Clearwater, FL 33762
	Clearwater, 1 C 307 02
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	議論 (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
(Use attachment if necessary)	
LE V: Effective date, if other the fective date is listed, the date	han the date of filing: (OPTION) e must be specific and cannot be more than five busing.)
LE V: Effective date, if other the fective date is listed, the date or 90 days after the date of file.	e must be specific and cannot be more than five busine
LE V: Effective date, if other the fective date is listed, the date or 90 days after the date of file REQUIRED SIGNATURE:	e must be specific and cannot be more than five busingling.)
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LE V: Effective date, if other the ffective date is listed, the date or 90 days after the date of file REQUIRED SIGNATURE: Signature of a (In accordance with sections an affirmation I am aware that any fals)	e must be specific and cannot be more than five busingling.)
LE V: Effective date, if other the ffective date is listed, the date or 90 days after the date of file REQUIRED SIGNATURE: Signature of a (In accordance with sections an affirmation I am aware that any fals)	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. The information submitted in a document to the Department of State
LE V: Effective date, if other the ffective date is listed, the date or 90 days after the date of file REQUIRED SIGNATURE: Signature of a (In accordance with sections an affirmation I am aware that any fals)	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. e information submitted in a document to the Department of State the felony as provided for in s.817.155, F.S.)

of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)