L13000097720

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
JUL 1 0 2013 <u>.</u> S. TONER			



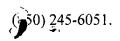


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SECRETARY OF STATE
AND AND SECRETARY OF STATE



COVER LETTER

Division of Corporations						
-	PA Technical Services LLC					
	ЕСТ:	Name of Limit	ed Liability Company			
•		Name of Lane	Ca Diability Company			
The e	nclosed Articles o	of Organization and fee(s) are	submitted for filing.			
Please	e return all corresp	ondence concerning this matt	er to the following:			
	Benjamin Be	eiler				
			Name of Person	-		
	PA Technica	l Services LLC				
			Firm/Company			
	1815 Patters	son Avenue	, .			
			Address	_		
	Deland, Florida 32724					
	bbeiler@sbo		y/State and Zip Code	_		
		E-mail address: (to be used to	or future annual report notification)			
For fu	rther information	concerning this matter, please	call:			
Benjamin Beiler			312 543-5103			
	Name	of Person	at () Area Code & Daytime Telephone Number			
Enclo	osed is a check f	or the following amount:				
1 \$125	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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:				
PA Technical Services LLC				
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1815 Patterson Avenue	1815 Patterson Avenue			
Deland, Florida 32724	Deland, Florida 32724			
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:				
Benjamin Beiler				
Name	ALC			
1815 Patterson Avenue				
Florida street address (P.O. Box NOT acceptable) Deland Florida 32724				
FL DOMANT TOTAL SET OF				
City, Stat	te, 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 Signatu	15th			

Page 1 of 2

	ARTICLE I	IV-	Manager(s) or	Managing	Memb	er(s)	:
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ARTICLE IV- Manager(s) or Managing Member is as follows:

The name and address of each Manager or Managing Member is as follows:

	<u>Title:</u> "MGR" = Manager	Name and Address:		
٠.	"MGRM" = Managing Member MGRM	Benjamin Beiler 1815 Patterson Avenue Deland, Florida 32724		
	(Use attachment if necessary)			
(If an	CLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.)	e date of filing: (OPTIONAL) t be specific and cannot be more than five business days		
	DECLUDED SIGNATURE.			

REQUIRED SIGNAT

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.)

Benjamin Beiler

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)