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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

EFFECTIVE DATE 07-15-13

From:

Account Name : A.A.ALI, CPA
Account Number : 120000000192
Phone : (407) 298-3900
Fax Number : (407) 298-0660

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
APEX VIDEOTECH, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
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EXAMINER

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**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

APEX VIDEOTECH, LLC

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

ARTICLE II - Address:

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

**5764 N. ORANGE BLOSSOM TRAIL # 220
ORLANDO, FL 32810**

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:

**MARTIN OKAIWELE
5764 N. ORANGE BLOSSOM TRAIL # 220
ORLANDO, FL 32810**

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..



MARTIN OKAIWELE/ Registered Agent's Signature

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TALLAHASSEE FL

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ARTICLE IV- Manager(s) or Managing Member(s):

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

"MGR" = Manager

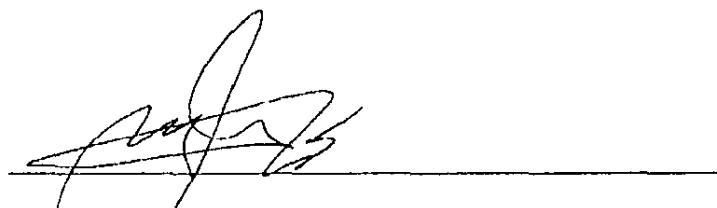
"MGRM" = Managing Member

MARTIN OKAIWELE - MGRM
5764 N. ORANGE BLOSSOM TRAIL # 220
ORLANDO, FL 32810

ARTICLE V: Effective date, if other than the date of filing: 7/15/2013

(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:



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.)

MARTIN OKAIWELE

Typed or printed name of signee

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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