

L130000128539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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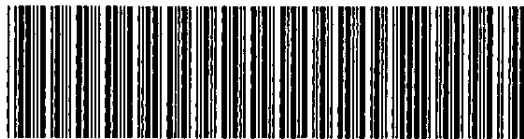
(Business Entity Name)

(Document Number)

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FACILITY OF STATE
CITIZENSHIP

J. SAULSBERRY
EXAMINER

SEP 11 2013

Articles of Organization Cover Letter

Interlink Commerce, LLC

Date: September 5, 2013

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

Subject: Interlink Commerce, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephen M. Dewsnap
Interlink Commerce, LLC
9024 NW 23 Place
Coral Springs, FL 33065

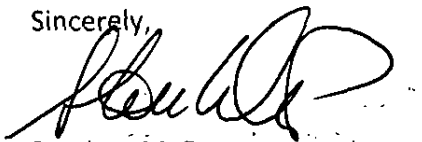
E-Mail: Sdewsnap@microliance.com

For further information concerning this matter, please call:

Stephen M. Dewsnap at (954) 818-9045

Enclosed is a check for the \$160.00 for Filing Fee, Certificate of Status & Certified Copy

Sincerely,



Stephen M. Dewsnap

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TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE OF FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

Interlink Commerce, LLC

ARTICLE II – Address:

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

Principle Office Address:

**9024 NW 23 Place
Coral Springs, FL 33065**

Mailing address:

**9024 NW 23 Place
Coral Springs, FL 33065**

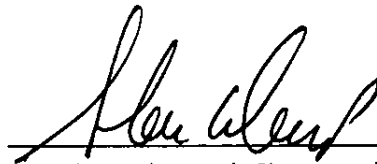
ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

The name and Florida Street Address of the registered agent are:

**Stephen M. Dewsnap
9024 NW 23 Place
Coral Springs, FL 33065**

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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)

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

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

Title:

"MGR" = Manager

"MGRM" – Managing Member

MGRM

Edward J. Dewsnap

7 Tyson Road

Franklin, MA 02038

MGRM

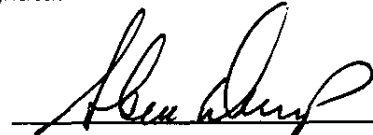
Stephen M. Dewsnap

9024 NW 23 Place

Coral Springs, FL 33065

ARTICLE V – Effective date, if other than the date of filing: (will be filing date)

Required Signature:



Signature of a member or an authorized representative of a member

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TALLAHASSEE, FLORIDA

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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..

(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.)

Stephen M. Dewsnap

Typed 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)