

(Re	questor's Name)	<u>-</u>
(Ad	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	+ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	,	

Office Use Only



300257786293

03/17/14--01045--008 **125.00

14 FEB 17 PM 3:18
SECRETARY OF STATE
TALLAMASSEE BLOSHA

MAR 1 8 2014 S. YOUNG

COVER LETTER

TO:	Registration Section Division of Corporations		
			78 F
SUBJE	CCT: Polish Trade Zone, LLC.		FS _
	Name of Li	mited Liability Company	三
			72
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	- 新皇 - 正
Diegra	return all correspondence concerning this m	patter to the following:	T PL 3 TO
i icasc	retain an correspondence concerning this in	atter to the following.	<u> </u>
	Bohdan Andraka		
		Name of Person	
	Polish Trade Zone, LLC.		
	Tollott Trado Estro, EES.	Firm/Company	
		. ,	
	10504 SW 17 Place	A 11.	
		Address	
	Gainesville, FL 32607		
•		City/State and Zip Code	
h .a	androko @vohoo oom		
<u>.ba</u>	ndraka@yahoo.com E-mail address: (to be use	d for future annual report notifica	ition)
			•
For fur	ther information concerning this matter, ple	ase call:	
Robda	n Andraka at (352) 2133900	
Donga	Name of Person		ephone Number
		•	•
Enclose	ed is a check for the following amount:		
교 \$ 125.0	0 Filing Fee ☐\$130.00 Filing Fee &	□\$155.00 Filing Fee &	□\$160.00 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)
	•		
	Mailing Address	Street/Courier Addi	ress
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporat	ions
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	. 2661 Executive Cent	
		Tallahassee, FL 3230	וו

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name: The name of the Limited Liability Company is: Polish Trade Zone, LLC. (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 10504 SW 17 Place Gainesville, Fl. 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Gainesville Florida street address of the principal agent are: Bohdan Andraka Name 10504 SW 17 Place Gainesville Florida street address of the principal agent are: Bohdan Andraka Name 10504 SW 17 Place Gainesville of process for the above stated limited liability company 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 performand of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Accepted 605, F.S.	MULLION ONCE INC.	
Polish Trade Zone, LLC. (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 10504 SW 17 Place Galnesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company, 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 performant of my duties, and I am familiar with and accept the objections of my position as registered agent as provided for in Chapter 605, F.S. Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	ARTICLE I - Name:	
(Must end with the words "Limited Liability Company, "L.L.C," or "LLC,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 10504 SW 17 Place Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgress of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place	The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability Company, "L.L.C," or "LLC,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 10504 SW 17 Place Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgress of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place		
(Must end with the words "Limited Liability Company, "L.L.C," or "LLC,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 10504 SW 17 Place Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street address of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgress of the registered agent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place Florida street adgent are: Bohdan Andraka Name 10504 SW 17 Place	Polich Trade Zone LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 10504 SW 17 Place Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S Registered Agent's Signature (REQUIRED) Page 1 of 2	(Must end with the words "Limited I	iability Company, "L.L.C.," or "LLC.")
The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address:	(Masseria Will life World Similes 2	audinity company, Diarci, or allow,
Principal Office Address: 10504 SW 17 Place Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 performant of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2		
10504 SW 17 Place Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S. Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	The mailing address and street address of the principal off	ice of the Limited Liability Company is:
10504 SW 17 Place Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S. Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	Detected Office Address.	Malling Address
Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S. Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	rincipal Office Address:	Walling Address.
Gainesville, FL 32607 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: Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S. Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	10504 SW 17 Place	10504 SW 17 Place
(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: Bohdan Andraka		
(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: Bohdan Andraka		
Bohdan Andraka Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	(The Limited Liability Company cannot serve as its own F	Registered Agent. You must designate an individual or
Name 10504 SW 17 Place Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	The name and the Florida street address of the registered a	agent are:
Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S. Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	Bohdan Andraka	
Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 performant of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	Name	
Florida street address (P.O. Box NOT acceptable) Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 performant of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2	40504 000 47 51	
Gainesville FL 32607 City Zip Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2		NOT apportable)
Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S. Chapter 605, F.S. CONTINUED	Florida silect address (F.O. Box	AOT acceptable)
Having been named as registered agent and to accept service of process for the above stated limited liability company 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 605, F.S. Chapter 605, F.S. CONTINUED	Gainesville	FL 32607
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 605, F.S Chapter 605, F.S. Registered Agent's Signature (REQUIRED) CONTINUED Page 1 of 2		Zip
Page 1 of 2	the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obli Chapte	the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r 605, F.S
AMASSET OF THE PROPERTY OF THE	. (CONTINUE	ED)
j parter	Page 1 of 2	<u> بر سر کی در از در </u>

<u>Title:</u>		Name and Address:
"AMBR" = Authorized	Member	
"MGR" = Manager AMBR		Bohdan Andraka
MINIOK		10504 SW 17 Place
		Gainesville, FL 32607
MOD		De le con T. Andrelia
MGR		Barbara T, Andraka
		10504 SW 17 Place Gainesville, FL 32607
•		Dainesville, 1 C 52507
(Use attachment if neces	ssarv)	
(Ose analyment if neces	,aury)	
	ther than the date of filing	; (OPTIONAL)
CLE V: Effective date, if o		1 d Control do a do a control d
ICLE V: Effective date, if o effective date is listed, the	date must be specific an	d cannot be more than five business days prior to or 90 days
effective date is listed, the	date must be specific an	d cannot be more than five business days prior to or 90 days
effective date is listed, the ate of filing.)	·	d cannot be more than live business days prior to or 90 days
effective date is listed, the ate of filing.)	if any.	
effective date is listed, the ate of filing.) ICLE VI: Other provisions,	if any.	
effective date is listed, the ate of filing.) ICLE VI: Other provisions,	if any.	
effective date is listed, the ate of filing.) ICLE VI: Other provisions,	if any.	
effective date is listed, the ate of filing.) ICLE VI: Other provisions,	if any.	
effective date is listed, the ate of filing.) ICLE VI: Other provisions, REQUIRED SIGNAT	if any.	

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this documer 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.)

Bohdan Andraka

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)

Page 2 of 2