

L14000053646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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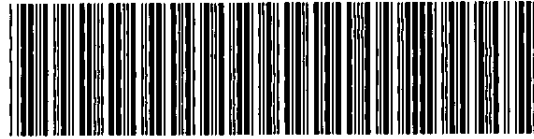
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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DIVISION OF CORPORATIONS  
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TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

April 1, 2014

CORPDIRECT AGENTS

SUBJECT: SLOAN'S UTC, LLC  
Ref. Number: W14000020487

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE  
3/31/14

We have received your document for SLOAN'S UTC, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 614A00006846

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE  
3/31/14

CORPDIRECT AGENTS, INC. (formerly CCR5)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-23

CONTACT: Kim Weidenbach

DATE: 03/28/14

REF. #: 9098038

CORP. NAME: SLOAN'S UTC, LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 70017557 FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

**ARTICLES OF ORGANIZATION  
OF  
SLOAN'S UTC, LLC**

**ARTICLE I - Name**

The name of the limited liability company is Sloan's UTC, LLC (the "Company").

**ARTICLE II - Address**

The mailing address and street address of the principal office of the Company is 1652 Mercer Avenue, West Palm Beach, FL 33401.

**ARTICLE III- Management**

The Company shall be managed by its members, as set forth in the Company's Operating Agreement and is therefore a member-managed Company.

**Member Manager**

Sloan Kamenstein

**Address of Member-Manager**

1652 Mercer Avenue, West Palm  
Beach, FL 33401

**ARTICLE IV - Registered Agent and Office**

The street address of the Company's initial registered agent and office is 1652 Mercer Avenue, West Palm Beach, FL 33401, and the name of its initial registered agent at such office is Sloan Kamenstein.

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Dated this 28<sup>th</sup> day of March, 2014.

/s/ Noemi Romero

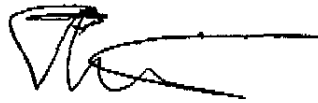
Name: Noemi Romero

Title: Authorized Representative

**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT**

The undersigned, having been named as Registered Agent and to accept service of process for Sloan's UTC, LLC, at the place designated in these Articles of Organization, hereby accepts the appointment as registered agent and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 605.

Dated this 18<sup>th</sup> day of March, 2014.



Sloan Kamenstein

14 MAR 21 10:00 AM  
FBI/DOJ  
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