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B. BOSTICK

MAY 7 2014

EXAMINED

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: INGATE Technology Services LLC Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Alan Greenstein Name of Person	
Firm/Company	
14559 Drafthorse lane	
Wellington, FL 33 414 City/State and Zip Code	
Greenstein 71 Q mail (com) E-mail address: (to be used for future annual report notification)	
For further information concerning this matter places call:	
Alan Greenstein at (S61) 779 5283 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee Securificate of Status St	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
The name of the Ellined Elability Company is.	
Ingate Technology (Must end with the words "Limited)	H Services LCC. Subility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
14559 Drafthorse lane Wellington, FL 3341W	14559 Drafthorse lare Wellington, FL 33414
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	legistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:
Alan Greens Name	tein
Name	
14559 Draftho Florida street address (P.O. Box)	(Se lone
Wellington City	Zip
the place designated in this certificate, I hereby accept a capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	vice of process for the above stated limited liability company a 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
Registered Agent's Signatu	9
Registered Agent's Signatu	re (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>l'itle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
M G R	Blanca Greenstein
	14559 Drafthorse kine
	Wellington FL 33414
MGR	Alan Greenstein
	14559 Drafthorse lane
	Wellington, FL 33414
	3 ,
V: Effective date, if other than the tive date is listed, the date must b	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9
Use attachment if necessary) V: Effective date, if other than the ctive date is listed, the date must b filing.) VI: Other provisions, if any.	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9
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ARTICLE IV-

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