## L14000086211

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Office
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## **COYER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: SmartTech Solutions, LLC Name of Lim	nited Liability Company
The enclosed Articles of Organization and fee(s) ar	•
Please return all correspondence concerning this ma	atter to the following:
Maurice Sterling	Name of Person
SmartTech Solutions, LLC	Firm/Company
112 Greenbriar Road	Address
Palatka, FL 32177-8877	ity/State and Zip Code
scoutmouse57@gmail.com E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, plea	se call:
Maurice Sterling at ( 3	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)  □\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



May 20, 2014

MAURICE STERLING 112 GREENBRIAR ROAD PALATKA, FL 32177-8877

SUBJECT: SMARTTECH SOLUTIONS, LLC

Ref. Number: W14000031687

We have received your document for SMARTTECH SOLUTIONS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is: SMART TECH SOLUTION LLC, document number L13000130629.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Please return 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.

Neysa Culligan Regulatory Specialist II

Letter Number: 814A00010869

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•	
The name of the Limited Liability Company is:		
SmartTech Solutions, LLC		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	·	
The mailing address and street address of the princip	al office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
112 Greenbriar Road	112 Greenbriar Road	
Palatka. FL 32177-8877	Palatka. FL 32177	<del></del>
*		
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its canother business entity with an active Florida registr	wn Registered Agent. You must designate an	individual or
The name and the Florida street address of the registe	ered agent are:	780
Maurice Sterling		至 图 可
Na	ame	FILE MY 29 ETARY C WHASSEE
112 Greenbriar Road		
Florida street address (P.O.	Box NOT acceptable)	
Palatka	FL 32177-8877	ORIE 9.
City	Zip	A CO
Having been named as registered agent and to accep	t service of process for the above stated limited	liability company at

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	Tit <u>le:</u>	Name and Addissess	
	"AMBR" = Authorized !	Name and Address:	
	"MGR" = Manager	iembei	
	AMBR	Ronald A. Powledge	
		10150 Shoreview Drive	
		Garland, TX 75238	<del></del>
			<del>_</del>
	AMBR	Maurice Sterling	
		112 Greenbriar Road	<del></del>
		Palatka, FL 32177-8877	<del>"</del>
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	(Use attachment if neces	ary)	
	•		
ARTIC	LE V: Effective date, if ot	ner than the date of filing: (OPTIONAL)	
(If an e	LE V: Effective date, if of		90 days after
(If an e	LE V: Effective date, if ot	ner than the date of filing: (OPTIONAL)	90 days after
(If an e the date	LE V: Effective date, if of offective date is listed, the ce of filing.)	ner than the date of filing: (OPTIONAL) late must be specific and cannot be more than five business days prior to or	90 days after
(If an e the date	LE V: Effective date, if of	ner than the date of filing: (OPTIONAL) late must be specific and cannot be more than five business days prior to or	90 days after
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(If an e the date	LE V: Effective date, if of offective date is listed, the ce of filing.)	ner than the date of filing: (OPTIONAL) late must be specific and cannot be more than five business days prior to or	90 days after
(If an e the date	LE V: Effective date, if of offective date is listed, the ce of filing.)	ner than the date of filing: (OPTIONAL) late must be specific and cannot be more than five business days prior to or	90 days after
(If an e the date	LE V: Effective date, if of offective date is listed, the ce of filing.)  LE VI: Other provisions, if	ner than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior to or any.	90 days after
(If an e the date	LE V: Effective date, if of offective date is listed, the ce of filing.)	ner than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior to or any.	90 days after
(If an e the date	LE V: Effective date, if of offective date is listed, the ce of filing.)  LE VI: Other provisions, if	ner than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prior to or any.	90 days after
(If an e the date	LE V: Effective date, if ot ffective date is listed, the ce of filing.)  LE VI: Other provisions, if REQUIRED SIGNATU	ate must be specific and cannot be more than five business days prior to or any.  RE:	90 days after
(If an e the date	LE V: Effective date, if of ffective date is listed, the ce of filing.)  LE VI: Other provisions, if   REQUIRED SIGNATU	ate must be specific and cannot be more than five business days prior to or any.  RE:  Authorized representative of a member.	
(If an e the date	LE V: Effective date, if ot ffective date is listed, the ce of filing.)  LE VI: Other provisions, if  REQUIRED SIGNATU  Sig (In accordance	ate must be specific and cannot be more than five business days prior to or any.  RE:  nature of a member or an authorized representative of a member. with section 605.0203 (1) (b), Florida Statutes, the execution of this documen	
(If an e the date	LE V: Effective date, if of ffective date is listed, the ce of filing.)  LE VI: Other provisions, if  REQUIRED SIGNATU  Sig (In accordance constitutes and	ate must be specific and cannot be more than five business days prior to or any.  RE:  Authorized representative of a member.	

ARTICLE IV-

Page 2 of 2

Filing Fees:

Maurice Sterling
Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)