

#L14000101882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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EFFECTIVE DATE  
6-20-2014

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K. SALY  
EXAMINER  
JUN 25 2014

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DirectTRAX GPS Tracking & Security, 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:

BRENDA BILBO

Name of Person

DIRECTTRAX GPS Tracking & Security, LLC

Firm/Company

4123 SILK BAY CT,

Address

TALLAHASSEE, FL 32308

City/State and Zip Code

brenda b @ directtrax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brenda BILBO

Name of Person

at ( 850 ) 212-8659

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EFFECTIVE DATE  
6-20-2014

ARTICLE I - Name:

The name of the Limited Liability Company is:

Direct TRAX GPS Tracking & Security, 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:

4123 SILK BAY CT  
TALLAHASSEE, FL  
32308

Mailing Address:

(same)

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:

BRENDA BILBO  
Name  
4123 SILK BAY CT  
Florida street address (P.O. Box NOT acceptable)  
TALLAHASSEE FL 32308  
City Zip

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.

Brenda Bilbo  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

AMBR

BETTY TORRES  
950 BOTTLE HOLLOW RD  
SHILOHVILLE, TN 37160

BRENDA BILBO  
4123 SILK BAY CT  
TALLAHASSEE, FL 32308

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 6/20/2014 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

BETTY TORRES - 50% Owner  
BRENDA BILBO - 50% Owner

REQUIRED SIGNATURE:

Betty Torres  
Signature of a member or an authorized representative of a member.  
(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. 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.)

BETTY TORRES  
Typed or printed name of signer

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)