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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CT: MotiveAte LLC	
	Name of L	mited Liability Company
The end	closed Articles of Organization and fee(s)	are submitted for filing.
Please r	return all correspondence concerning this r	natter to the following:
•	Zoran Jason Pavlovic	
		Name of Person
	MotiveAte LLC	
		Firm/Company
	9760 Osprey Landing Drive	
		Address
	Orlando, Florida, 32832	
70		City/State and Zip Code
201	ran.j.pavlovic@gmail.com E-mail address: (to be use	ed for future annual report notification)
For furt	her information concerning this matter, ple	ease call:
Brian N		516) 5231506
	Name of Person	Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:	
┇\$125.00	Filing Fee \$\Bigcup \frac{1}{30.00}\$ Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □\$160.00 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

MotiveAte LLC	
(Must end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9760 Osprey Landing Drive	9760 Osprey Landing Drive
Orlando, Florida	Orlando, Florida
32832	32832
Brian Mayrsohn	Name
	Name
9760 Osprey Landing Dr	
Florida street address (P.C	
Orlando City	FL 32832 Zip
Chy	Ζιμ
Traving ocen namea as registered agent and to acc	ept service of process for the above stated limited liability company
the place designated in this certificate, I hereby capacity. I further agree to comply with the provi of my duties, and I am familiar with and accept the Buy M	accept the appointment as registered agent and agree to act in this isions of all statutes relating to the proper and complete performant the obligations of my position as registered agent as provided for in Chapter 605, F.S Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized	l Member	Name and Address:		
"MGR" = Manager		Zaran Daulauda		
Manager	_	Zoran Pavlovic 9760 Osprey Landing Drive		
		9700 Osprey Landing Drive		
Manager	_	Alexander mansoor Eskandari		,
		431 E Central Blvd		
		Orlando FL 32801		
Manager	_	Brian Mayrsohn		
	-	9760 Osprey Landing Drive		
Manager		Vijay Budhram		
Wanager	-	3138 Bellingham Drive		
		Orlando, Florida, 32825		
(Use attachment if nece	• .			
LE V: Effective date, if c	other than the date of fi	iling: (OPT c and cannot be more than five business days		0 days a
LE V: Effective date, if careful fective date is listed, the of filing.)	other than the date of fi date must be specifi			0 days a
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