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2015 JAN 28 PM 12: 53 SECRETARY OF STATE

FEB 0 5 2015 J. HARR!S

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: MARCTEC, LLC Name of Lit	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	natter to the following:	
	PETER BONUTTI	Name of Person	
		Firm/Company	
	1680 S. OCEAN BOULEVARD	Address	
	MANALAPAN, FL 33462	City/State and Zip Code	
For fur	E-mail address: (to be use ther information concerning this matter, ple	d for future annual report notifica	ition)
PETE	R BONUTTI at (at (217) 342-3400 Area Code Daytime Tel	lephone Number
	ed is a check for the following amount: 10 Filing Fee \$\Bigsup \frac{1}{3} \frac{1}{3} \text{0.00 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 Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	my is:	
MARCTEC, LLC		
(Must end with the w	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 Cor	mpany is:
Principal Office Address:	Mailing Address:	
1680 S. OCEAN BOULEVARD MANALAPAN, FL 33462		
	stered Office, & Registered Agent's Signatur erve as its own Registered Agent. You must des orida registration.)	
The name and the Florida street address o	of the registered agent are:	
PETER BONUT	TI Name	
	N BOULEVARD dress (P.O. Box NOT acceptable)	
MANALAPAN	FL 33462 City Zip	
	City Zip	
the place designated in this certificate, capacity. I further agree to comply with	and to accept service of process for the above state. I hereby accept the appointment as registered ago the provisions of all statutes relating to the proper advacept the obligations of my position as registe. Chapter 605, F.S.	gent and agree to act in this per and complete performance
(B)	D	
Registered	Agent's Signature (REQUIRED)	
	(CONTINUED)	2015 J SECF TALL

Page 1 of 2

ECRETARY OF STATE LLAHASSEE.FLORIS

2015 JAN 28 PH 12: 53

<u>Title:</u> "AMBR" = Authorized Membe	Name and Address:	
"MGR" = Manager		
MGR	PETER BONUTTI	
	1680 S OCEAN BOULEVARD	
	MANALAPAN, FL 33462	
MGR	BORIS BONUTTI	
	1303 W EVERGREEN	
	EFFINGHAM, IL 62401	
,		
(Use attachment if necessary)		
(**************************************		
ective date is listed, the date moof filing.) E. VI; Other provisions, if any.	the date of filing: (OPTIONAL) ist be specific and cannot be more than five business days prior to or 90) da
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