Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078

Phone Fax Number : (407)843-8980 : (407)244-5690

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: troy denault@gmail.com

FLORIDA LIMITED LIABILITY CO.

Soter, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 02 |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Soter, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address and Street Address: 411 Cypress Street Indialantic, Florida 32903

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent age.

S. Troy Denault

411 Cypress Street
Florida street address (P.O. Box NOT acceptable)

Indialantic, Florida 32903 City, State, and 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.

Registred Agent's Signature: S. Troy Denault

Article IV - Management:

This is a manger-managed Florida Limited Liability Company for purposes of Florida Statutes Section 605,0407. The name and address of each person authorized to manage and control the Limited Liability Company are:

<u>Title:</u> Manager Name and Address: S. Troy Denault 411 Cypress Street Indialantic, Florida 32903

Article V - Effective Date:

The effective date of these Articles of Organization shall be upon the filing thereof with the Florida Department of State.

Required Signature

S. Troy Denault, Member

Signature of a member of an authorized representative of a membe

This document is executed in accordance with section 605.0203(1)(b). Florida Statutes. 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 a 817.155, F.S.

S. Troy Denauk
Typed or printed name of signor

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)