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OCT 24 2016

COVER LETTER

ÇO:	Registration Section Division of Corporations	
SUBJ	ECT: Mark and Ju	of Limited Liability Company
The en	closed Articles of Organization and fee	(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the following:
	Mark Frye	Name of Person
		Name of Person
		Firm/Company
	14237 Sahal	ee hane
	Oelando, Fli	orida 32828
	marke major	City/State and Zip Code technologics, Com
	E-mail address: (tel be	used for future annual report notification)
For furth	er information concerning this matter, p	please call:
	Mark Frye :	407 382-6410
	Name of Person	Area Code Daytime Telephone Number
	ed is a check for the following amount:	
\$ 125.0	0 Filing Fee \$\frac{130.00 \text{ Filing Fee}}{\text{Certificate of Statu}}	& \$155.00 Filing Fee & \$160.00 Filing Fee, certified Copy (additional copy is enclosed) Sectified Copy (additional copy is enclosed)
	Mailing Address	Street Address
	New Filing Section Division of Corporations	New Filing Section Division of Corporations
	P.O. Box 6327	Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION OF MARK AND JULIE FRYE, LLC.

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ARTICLE I – NAME

TALLAHASSEE, FLORIDA

The name of the limited liability company is Mark and Julie Frye, LLC. ("company").

ARTICLE II - ADDRESS

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

Principal Office Address: 14237 Sahalee Lane Orlando, Florida 32828

Mailing Address: 14237 Sahalee Lane Orlando, Florida 32828

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Mark Frye 14237 Shalee Lane Orlando, Florida 32828

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.

Mark Frye

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

AMBR

Mark Frye

14237 Sahalee Lane Orlando, Florida 32828

AMBR

Julie Frye

14237 Sahalee Lane Orlando, Florida 32828

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

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 s.817.155, F.S.

Mark Frye

Typed or printed name of signee

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