

L17000049805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

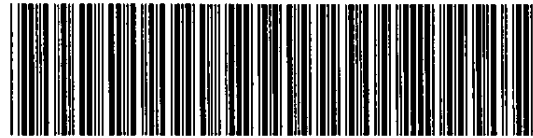
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
17 MAR -7 AM 11:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W17-16216

03/08/17



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 24, 2017

THOMAS MARSHALL  
720 BROOKER CREEK BLVD., STE. 221  
OLDSMAR, FL 34677

SUBJECT: SMARTERSTEM, LLC  
Ref. Number: W17000016216

We have received your document for SMARTERSTEM, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is P15000046724.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 217A00003607

RECEIVED  
FEB 27 AM 9:38  
DIVISION OF CORPORATIONS  
TALLAHASSEE

Thomas Thaddeus Marshall  
SmarterSTEM, Inc.  
720 Brooker Creek Boulevard, Suite 221  
Oldsmar, FL 34677  
352-321-7058

March 2, 2017

Re: SmarterSTEM, LLC (in relation to SmarterStem, Inc.)  
Ref. Number: W17000016216

Dear Sir/Madam:

Please be advised that I am the authorized representative of SmarterSTEM, Inc. For the record, I have no intention of ever revoking the dissolution of SmarterSTEM, Inc. at any time, thus enabling the approval of the use of the SmarterSTEM name by SmarterSTEM, LLC.

Your anticipated cooperation in addressing this matter is greatly appreciated. Thank you.

Sincerely,



Thomas Marshall

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SmarterSTEM, LLC

(Must contain 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:**

720 Brooker Creek Boulevard, Suite 221  
Oldsmar, FL 34677

**Mailing Address:**

720 Brooker Creek Boulevard, Suite 221  
Oldsmar, FL 34677

**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:

Thomas Marshall

Name

720 Brooker Creek Boulevard, Suite 221

Florida street address (P.O. Box **NOT** acceptable).

Oldsmar, FL 34677

City

State

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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Thomas Marshall

720 Brooker Creek Boulevard, Suite 221

Oldsmar, FL 34677

AMBR

Michael Mack

775 Benicia Drive, #3

Santa Rosa, CA 95409

(Use attachment if necessary)

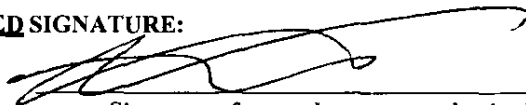
**ARTICLE V:** Effective date, if other than the date of filing: 2/20/2017 (OPTIONAL)

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**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.

\_\_\_\_\_  
Typed or printed name of signee

**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)

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TALLAHASSEE, FLORIDA