

17000101868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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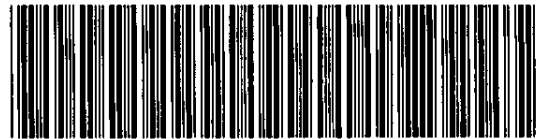
(Business Entity Name)

(Document Number)

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17 MAY -8 AM 7:11
SEC. OF STATE
TALLAHASSEE, FL

W17-36311

M. MOON
MAY 08 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2017

KENNETH MCCLINTOCK
1407 JUMANA LOOP
APOLLO BEACH, FL 33572

SUBJECT: MRI 3T TECH, LLC.
Ref. Number: W17000038311

FILED
SECRETARY OF STATE
17 MAY -8 AM 7:11

We have received your document for MRI 3T TECH, LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of organization must be prepared in compliance with section 605.0201, Florida Statutes. We are enclosing the appropriate forms and instructions for your convenience.

Please return 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.

Matthew T Moon
Regulatory Specialist II

Letter Number: 017A00008751

17 MAY -8 PM 2:58

COVER LETTER

TO: New Filing Section
Division of Corporations

ATTN: MATT MOON

RECEIVED
INFORMATION SERVICES

SUBJECT: MRI 3T TECH, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization are corrected and resubmitted for filing without an additional filing fee, per advisement from Division of Corporation personnel via telephone.

Please return all correspondence concerning this matter to the following:

D. KAY CARR

NAME OF PERSON

D. KAY CARR, P.A.

FIRM/COMPANY

214 APOLLO BEACH BOULEVARD

ADDRESS

APOLLO BEACH, FL 33572

CITY/STATE and ZIP CODE

FABRICWEB@AOL.COM

DKAYCARRPARALEGAL@YAHOO.COM

EMAIL ADDRESS: (to be used for future annual report notification)

For further information concerning this matter, please call:

D. KAY CARR

Name of Person

at (813)

Area Code

645-7557

Daytime Phone Number

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: W17000038311

17 MAY -8 AM 7:11

RECEIVED
STATE
CORPORATION
DIVISION

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

**ARTICLE I
NAME**

The name of the Limited Liability Company is: MRI 3T TECH, LLC.

**ARTICLE II
ADDRESS**

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

Principal Office Address:

1407 JUMANA LOOP
APOLLO BEACH, FL 33572

Mailing Address:

1407 JUMANA LOOP
APOLLO BEACH, FL 33572

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

The name and the Florida street address of the Registered Agent are:

KENNETH LEE McCLINTOCK
1407 JUMANA LOOP
APOLLO BEACH, FL 33572

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
KENNETH LEE McCLINTOCK

SECRET
17 MAY - 8 AM 7:11
STATE

ARTICLE IV

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

TITLE:

"AMBR" = Authorized Member

"MGR" = Manager

NAME and ADDRESS:

KENNETH LEE McCLINTOCK

1407 JUMANA LOOP
APOLLO BEACH, FL 33572

ASHLEY N. McCLINTOCK

1407 JUMANA LOOP
APOLLO BEACH, FL 33572

ARTICLE V
EFFECTIVE DATE

Effective date, if other than the date of filing:
(OPTIONAL)

5/3/17 16h Mc

17 MAY -8 AM 7:11
SEC. OF STATE
FILED

(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

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.

KENNETH LEE McCLINTOCK

Typed or printed name of Signee

17 MAY -8 AM 7:11
SECRETARY OF STATE
OFFICE OF THE SECRETARY
TALLAHASSEE, FLORIDA