

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000271889 3)))



H170002718893ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : FILINGS, INC. Account Number : 072720000101

Phone : (850)385-6735

Fax Number : (954)641-4192

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

Email Address:_____

170CT 16 AM 10:

17 OCT 16 PM 2: 16
UNEAU GE COMMERCIAL
NFORMATION SERVICES

FLORIDA LIMITED LIABILITY CO.

Futuregenrobotics, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

C Kinsey

Electronic Filing Menu

Corporate Filing Menu

Help

e esta

ARTICLES OF ORGANIZATION

OF

FUTUREGENROBOTICS, LLC

ARTICLE I - NAME

The name of the limited liability company is FUTUREGENROBOTICS, LLC. ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability

Company is:

Principal Office Address: 20423 State Road 7 Ste F6, #356 Boca Raton, Florida 33498

Mailing Address: 20423 State Road 7 Ste F6, #356

Boca Raton, Florida 33498

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

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

Ian M. Berkowitz, Esq. 2101 NW Corporate Boulevard, Suite 300 Boca Raton, Florida 33431

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.

H17000271889

20012/0012

ARTICLE IV - MANAGERS OR MEMBERS

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

Titlo:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

AMBR

Michael T. Letsky

20423 State Road 7 Ste F6, #356 Boca Raton, Florida 33498

AMBR

Jeanne Letsky

20423 State Road 7 Ste F6, #356 Boca Raton, Florida 33498

ARTICLE V - OTHER MATTERS

This Company is hereby authorized to conduct any and all legal business activities as agreed to by the Members.

REQUIRED SIGNATURE:

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

This document is executed in accordance with section 605.0203(1)(b), Plorida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third-dogree felony as provided for in s.817.155, F.S.

Michael T. Letsky

Typed or printed name of signed

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 confetitutes a third-degree felony as provided for in a.817.155, F.S.

Jeanne Letsky

Typed or printed name of signee