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(R	(equestor's Name)	
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COVER LETTER

	lew Filing Section Division of Corporations	
SUBJECT	Evolution Cybermarketing LLC.	
SUBJECT	Name of Limited Liability Company	
The enclos	sed Articles of Organization and fee(s) are submitted for filing.	
Please retu	arn all correspondence concerning this matter to the following:	
	Eric Michael Green III	
	Name of Person	•
		-
	Firm/Company	
	P.O. Box 11163	
	Address	•
	Tallahassee, FL 32302	
	City/State and Zip Code	•
	michael@lol7.net	_
	E-mail address: (to be used for future annual report notification)	
For further i	nformation concerning this matter, please call:	
	Eric Michael Green III \$13 850-8333	
	Name of Person Area Code Daytime Telephone Number	
Enclosed i	s a check for the following amount:	
\$125.00 F	iling Fee \$\sum_{\text{S130.00}} \subseteq \text{S130.00} \text{ Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	
	Mailing Address Street Address	
	New Filing Section New Filing Section Division of Comparations Division of Comparations	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:		
The name of the Limited Liability	Company is:	
Evolution Cybermark	eting LLC.	
		ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and street ad	dress of the principal office of	of the Limited Liability Company is:
Principa	d Office Address:	Mailing Address:
<u>1111(1)</u> 2	i Office Auditess.	Staning Address.
19001 Lutterworth Co	ourt	P.O. Box 11163
Land O Lakes, FL 34	638	Tallahassee, FL 32302
		- -
ARTICLE III - Registered Age	nt Danistanad Office & Day	airtanad Anant's Signatura.
		stered Agent. You must designate an individual or
another business entity with an a		nered rigenti i ou man designite un marriaum or
•	,	
The name and the Florida street a	ddress of the registered agent	t are:
	Eric Michael Green III	
	Nam	16
	19001 Lutterworth Court	
	Florida street address (P.O	. Box NOT acceptable)

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..

State

Land O Lakes

City

Registered Agent's Signature (REQUIRED)

34638

Zip

(CONTINUED)

SECRETARY OF STATE

<u>litle:</u>	Name and Address:
AMBR" = Authorized Memb	
MGR" = Manager	21.44.12
AMBR	Eric Michael Green III
	19001 Lutterworth Court Land O Lakes, FL 34638
	Land O Lakes, PL 34038
	
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V: Effective date, if other th	an the date of filing:
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