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| PICK-UP                                 | ☐ WAIT            | MAIL        |  |  |  |
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## COVER LETTER



TO: **New Filing Section Division of Corporations** 

| ATEG (Advanced Technology Engineering Group)   |
|--|
| Name of Limited Liability Company  |
| The enclosed Articles of Organization and fee(s) are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:  |
| Mike King Name of Person   |
| Name of Person   |
| ATEG (Advanced Technology Engineering Group)   |
| Firm/Company   |
| 5846 E Loop 335 South  |
| Address  Address  Address  Address  TX. 79118  M 457 @ gmail-Com   |
| m 457 @ gmail. com   |
| E-mail address: (to be used for further annual report notification)  |
| For further information concerning this matter, please call:   |
| Mike King at 806 679-7822  Name of Person Area Code Daytime Telephone Number   |
| Enclosed is a check for the following amount:  |
| \$125.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \text{\$5160.00 Filing Fee, Certified Copy} \\ \text{Certified Copy} \\ Certified |

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

Certified Copy

(additional copy is enclosed)



August 27, 2019

MIKE KING 5846 E LOOP 335 S AMARILLO, TX 79118

SUBJECT: ATEG (ADVANCED TECHNOLOGY ENGINEERING GROUP)

Ref. Number: W19000079041

We have received your document for ATEG (ADVANCED TECHNOLOGY ENGINEERING GROUP) and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 919A00017678

SI:1 Hd 5-2356107

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| A | RT | ľ | $\mathbf{C}$ | LE | 1 | - | Na | me | • |
|---|----|---|--------------|----|---|---|----|----|---|
|   |    |   |              |    |   |   |    |    |   |

The name of the Limited Liability Company is:

## Advanced Technology Engineering Group, 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:

5846 E Loop 335 South Same as Principal

Amarilla 1 Tx 79118

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:

Northwest Registered Agent LLC

Name

7901 4th St N STE 300

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

St. Petersburg FL 33702

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..

Northwest Registered Agent LLC

Tom Glover - Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

SECRETARY OF STATE

## ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 da 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 the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any.

**REOUIRED 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)