

L19000275065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

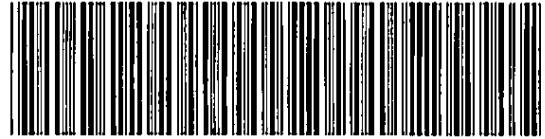
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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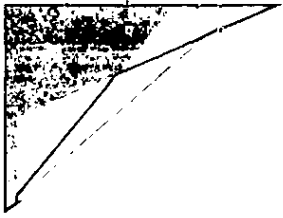
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SILVERDALE
ALL INFORMATION
ON THIS PAGE



TechWerks

626 W. Sigwalt Street
Arlington Heights, IL 60005-1736
(202)-834-4371
Mike@technologywerks.com



OCT 25 2019

To: New Filing Section
Division of Corporations

Subject: TechWerks Evoke JV, L.L.C.

To Whom It May Concern:


Enclosed please find original Articles of Organization and a check written to the Order of the Florida Department of State in the amount of One Hundred Sixty and 00/100 (\$160.00). In addition, **please find a self-addressed FedEx Envelope. Please return the Certificate of Status, payment receipt and a Certified Copy of the Articles of Organization in the enclosed self-addressed FedEx Envelope.**

Besides the return of the Certificate of Status, receipt and Certified Copy of the Articles of Organization, please return all other correspondence concerning this matter to the following:

Michael Fravell
TechWerks Evoke JV, L.L.C.
c/o TechWerks, LLC
2001 Clarendon Blvd., Suite 705
Arlington, VA 22201
(202) 834-4371
Mike@technologywerks.com

For further information concerning this matter, please call:

Harry T Alexander Jr.
(202) 997-1301


Michael Fravell
Member

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STATE OF FLORIDA
DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION
OF
TechWerks Evoke JV, L.L.C.**

ARTICLE I – Name:

The name of the Limited Liability Company is:

TechWerks Evoke JV, L.L.C.

ARTICLE II – Address:

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

Principal Office Address

2001 Clarendon Blvd., Suite 705
Arlington, Virginia 22201

Principle Mailing Address

2001 Clarendon Blvd., Suite 705
Arlington, Virginia 22201

ARTICLE III. Registered Agent, Registered Office, & Registered Agent's Signature:

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

Michael Fravell
552 Desert Oak Drive
Pensacola, Florida 32514

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.


Michael Fravell

Date: October __, 2019

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FALL RIVER, MASSACHUSETTS

TechWerks Evoke JV, L.L.C.

ARTICLE IV.

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

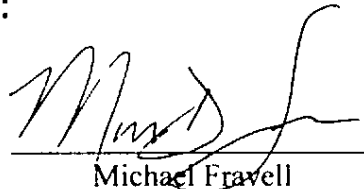
Title:

AMBR

Name and Address:

TechWerks, LLC
552 Desert Oak Drive
Pensacola, Florida 32514

REQUIRED SIGNATURE:



Michael Fravell
Authorized Representative
Member - TechWerks, LLC

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.



Michael Fravell

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SOLICITOR GENERAL
TALLAHASSEE, FLORIDA