

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.

((H21000005011 3)))



H210000050113ABCK

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 : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407)843-4600
Fax Number : (407)843-4444
Attn: Tami D. Passley

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

Email Address: dmeneffee@partstat.com

FLORIDA LIMITED LIABILITY CO.

Partstat Supply Chain Services VII, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

M MOON

JAN 07 2021

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION
OF
PARTSTAT SUPPLY CHAIN SERVICES VII, LLC**

ARTICLE I - NAME

The name of this limited liability company is Partstat Supply Chain Services VII, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

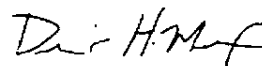
The mailing address and street address of the principal office of the Company is 1040 Willa Springs Drive, Winter Springs, Florida 32708.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 1040 Willa Springs Drive, Winter Springs, Florida 32708, and the name of the initial registered agent of the Company at that address is Dennis H. Menefee.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company and the initial managers of the Company are Dennis H. Menefee and Mitchell S. Bonett.

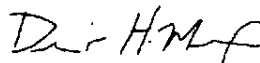


Dennis H. Menefee, Authorized Representative

2021 JAN -6 PM 12:30
FILED
CLERK OF COURT
JANUARY 6 2021
JANUARY 6 2021

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.



Dennis H. Menefee