

L21000016373

Florida Department of State
Division of Corporations
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H210000284643ABC.

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : AGENTS AND CORPORATIONS, INC
Account Number : I20010990112
Phone : (302) 575-0875
Fax Number : (302) 575-1642

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 JAN 21 AM 9:56

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
ASTER ROTODATH LLC**

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

2021 JAN 21 PM 2:47

H210000284643

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ASTER ROTODATH LLC

(Must end with 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:810 EUGENE ST
HOOD RIVER, OR 97031**Mailing Address:**810 EUGENE ST
HOOD RIVER, OR 97031**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:

Rebecca Toda

Name

1032 Sterling Point Place

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

Gulf Breeze, FL 32563

FL

City

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.

Agents and Corporations, Inc.

By: Rebecca Toda

Registered Agent's Signature (Required)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

MATTHEW ROTH
810 EUGENE ST., HOOD RIVER, OR 97031

MGR

MATTHEW ROTH
810 EUGENE ST., HOOD RIVER, OR 97031

AMBR

SARAH ROTH
810 EUGENE ST., HOOD RIVER, OR 97031

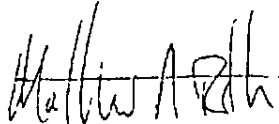
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

MATTHEW ROTH

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)

01/20/2021 12:24 MCFARLAND, GOULD, LYONS, SULLIVAN & HOGAN, P.A.
1/20/2021

(FAX 727) 461-6380

P.001/003

LA 1000015247

Division of Corporations

Florida Department of State

Division of Corporations

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Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : MCFARLAND, GOULD, LYONS, SULLIVAN & HOGAN, P.A.
Account Number : I19990000015
Phone : (727)461-1111
Fax Number : (727)461-6430

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

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FLORIDA LIMITED LIABILITY CO.

Acc-Q-Trac LLC

Certificate of Status	0
Certified Copy	0
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2/11/20

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2021 JAN 20 PM 4:26

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**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

Acc-Q-Trac LLC

ARTICLE I - NAME AND MAILING ADDRESS

The name of the Limited Liability Company is Acc-Q-Trac LLC, and its principal office and mailing address is 3538 Shoreline Circle, Palm Harbor, Florida 34684.

**ARTICLE II - REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE**

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

Richard D. Nelson
3538 Shoreline Circle
Palm Harbor, Florida 34684

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.



RICHARD D. NELSON, Registered Agent

ARTICLE III - MANAGEMENT

This Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed Company. The initial Manager shall be Richard D. Nelson, 3538 Shoreline Circle, Palm Harbor, Florida 34684.

Prepared By:
McFarland, Gould, Lyons,
Sullivan & Hogan, P.A.
Gary W. Lyons, Esq.
FBN: 0268186
311 S. Missouri Avenue
Clearwater, FL 33756
(727) 461-1111

2021 JAN 20 PM 4:26
FILED
CLERK OF CIRCUIT COURT
PALM HARBOR, FLORIDA

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization for a Florida Limited Liability Company this 20 day of JANUARY, 2021.



RICHARD D. NELSON

Title: Authorized Manager/Person

(In accordance with section 605.0203 (1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 section 817.155, F.S.)

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JAN 20 2021
TALLAHASSEE, FLORIDA

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