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(Re	questor's Name)			
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COVER LETTER

то:	New Filing Sec Division of Co				
C110 11	UT&T LL				
SUBJE	ECT:	Name of	Limited Li	ability Company	
The en	closed Articles of	Organization and fee(s) are submi	tted for filing.	
Please	return all corresp	ondence concerning this	matter to t	the following:	
	Mark T Dev	ereaux			
			Nam	e of Person	
	UT&T LLC				
			Firm	n/Company	
	424 E Prosp	ect St			
			A	Address	
	Jackson, MI	49203			
	accounting@	50tel com	City/Stat	e and Zip Code	
			sed for futu	ire annual report notifica	tion)
For furth	ner information co	ncerning this matter, pl	ease call:		
	Mark T Dev	ereaux	517	262-1941	
	Nam	ne of Person		le Daytime Telepho	
Enclose	ed is a check for t	he following amount:			
≣ \$12:	5.00 Filing Fee	□\$130.00 Filing Fee Certificate of Status	Ce	\$155.00 Filing Fee & rtified Copy tional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division	ng Address Tling Section on of Corporations Box 6327		Street Address New Filing Section I The Centre of Tallah 2415 N. Monroe Str	nassee

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

UT&T LLC				
(Must cont	ain the words "Limited Lia	bility Company	, "L.L.C.," or "LLC.")	
RTICLE II - Address:				
he mailing address and street a	ddress of the principal offic	ce of the Limited	l Liability Company is:	
Princip	Principal Office Address:		Mailing Address:	
424 E Prospect St. Ja	eckson. MI 49283	PO	PO Box 254, Spring Arbor, MI 49283	
he Limited Liability Company	cannot serve as its own Re	egistered Agent.	nt's Signature: You must designate an individual o	
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	cannot serve as its own Reactive Florida registration.)	egistered Agent.)	nt's Signature: You must designate an individual o	
The Limited Liability Company nother business entity with an a	cannot serve as its own Reactive Florida registration.)	egistered Agent.) gent are:	nt's Signature: You must designate an individual o	
The Limited Liability Company nother business entity with an a	cannot serve as its own Reactive Florida registration.) address of the registered at Corporation Service Co	egistered Agent.) gent are:	nt's Signature: You must designate an individual o	
The Limited Liability Company nother business entity with an a	cannot serve as its own Reactive Florida registration.) address of the registered at Corporation Service Co	egistered Agent. gent are: ompany	nt's Signature: You must designate an individual o	
The Limited Liability Company nother business entity with an a	cannot serve as its own Reactive Florida registration.) address of the registered as Corporation Service Co	egistered Agent.) gent are: https://www.nipany	You must designate an individual of	
The Limited Liability Company nother business entity with an a	cannot serve as its own Reactive Florida registration.) address of the registered as Corporation Service Control 1201 Hays Street	egistered Agent.) gent are: https://www.nipany	You must designate an individual	

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.

Eligieth Vitchen
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	0
AMBR	Ross N Devereaux 471 Oakwood Beach Dr
	Brooklyn, MI 49230
AMBR	David Jones
	1260 S Sandstone Rd Jackson, MI 49201
	<u>Jackson, MI 49201</u>
AMIND	L'acia Carat
AMBR	Kevin Smyth 35652 Somerset
	Westland, MI 48186
	
(Use attachment if necessary)	
ARTICLE V: Effective date if other than the c	late of filing: (OPTIONAL)
	specific and cannot be more than five business days prior to or 90 days after
he date of filing.)	
	ot meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departme	ent of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE: A	
Ross Der	
	member or an authorized representative of a member.
Signsture of a This document is ex-	ecuted in accordance with section 605.0203 (1) (b). Florida Statutes.
I am aware that any f	alse information submitted in a document to the Department of State
constitutes a third de	gree felony as provided for in s.817.155, F.S.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Ross N Devereaux