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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone

: (305)552-5973

Fax Number

: (305)675-5944

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

FLORIDA LIMITED LIABILITY CO. GOTME DIGITAL TECH, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADWIN
ARTICLE L. Nom.
The name of the Limit
The name of the Limited Liability Company is:
Gotme Digital tech LLC
Oome Digital +
regital tech. IIC
The mailing address and street address of the principal office of the Limited Liability
Company address and street address of the
company is:
1 the minited Liability
1630 NE 60th St
-120 10C (0) "ST
Fort Landerdale 33334 FL
= 1 = where 32234 = 1
APTICLE
ARTICLE III - Registered Agent, Registered Office:
The name and the Florida growth Registered Office:
Company carrier serve as in a men Basileet address of the registered again
The name and the Florida street address of the registered agent are: (The Limited! Liability with an active Florida registration.)
south states
Abad Ricardo Ayanda Rodriguez
- Mar K 100000 Avanach 0 0
William Rody, wilez
1(030)
-1030 NE (00 6-
TORT I AUDITORNI -
IURI LAUDERDALE FL 33334
ARTICLE IV
The name and title of an 1
Liability Communication authorized to manage and control it
The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
Abad Kingardo Nom a a como como como como como como com
Abad Ricardo Avanda Rodriguez (AMBR)
10 0 1 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2

Required Signatures:

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.

Aback Ricords Avender Rodr/91027
Typed or printed name of signee

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..

Registered Agent's Signature (REQUIRED)

22 OCT 12 PM 12: 35