

L98000000048

TRANSMITTAL LETTER  
FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

000002393590--1  
-01/08/98--01024--013  
\*\*\*\*337.50 \*\*\*\*337.50

SUBJECT: INLED LLC.  
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit  
\$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. Please send one check for the total amount made payable to the Florida Department of State.

FILED  
98 JAN -8 PM 2:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: ANTHONY B DONOFRIO  
Name (Printed or typed)

5440 NE 22ND TERRACE APT 1  
Address

FT. LAUDERDALE FL 33308  
City, State & Zip

954-938-0024  
Daytime Telephone number

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Verify	X
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W. P. Verifier	DCC

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

INLED L.L.C.

**ARTICLE II - Address:**

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

5440 NE 22ND TERRACE APT. 1  
FT. LAUDERDALE, FL 33308

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

PERPETUAL

**ARTICLE IV - Management:**

(check and complete the appropriate statement)

- ☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

- ☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

JAMES. S. ABERCROMBIE  
71 INDIAN FIELD RD.  
GREENWICH, CT 06830

ANTHONY B. DONOFRIO  
5440 NE 22ND TERRACE APT 1  
FT. LAUDERDALE, FL. 33308

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**ARTICLE V - Admission of Additional Members:**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

NEW MEMBERS SHALL BE ADMITTED  
ONLY UPON A MAJORITY VOTE OF EXISTING  
MEMBERS.

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**ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

THE LIMITED LIABILITY COMPANY  
SHALL CONTINUE ITS NORMAL COURSE OF  
BUSINESS IN THE EVENT OF THE DEATH, RETIREMENT,  
RESIGNATION, EXPULSION, BANKRUPTCY OR  
DISSOLUTION OF A MEMBER OR THE OCCURRENCE  
OF ANY OTHER EVENT WHICH TERMINATES THE  
CONTINUED MEMBERSHIP OF A THEN EXISTING  
MEMBER.


NOTE: If no provisions are to be made in Article V and VI remove this page before submitting for filing with the Department of State.

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of \_\_\_\_\_  
INLED L.L.C. deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is
- 3) if any, the agreed value of property other than cash contributed by member(s) is  
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is  
This total includes amounts from 2 and 3 above.

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\$2000.00  
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TALLAHASSEE, FLORIDA

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member.

In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

INLED L.L.C.

2. The name and address of the registered agent and office is:

ANTHONY B. DONOFRIO  
(NAME)

5440 NE 22ND TERRACE, APT 1

(P. O. Box NOT ACCEPTABLE)

FT. LAUDERDALE, FL. 33308  
(CITY/STATE/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.*

  
(SIGNATURE)

11.30.97  
(DATE)

**Filing Fee: \$ 35 for Designation of Registered Agent**

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