

L98000000306

Document Number Only

CT Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

CoM Systems, L.L.C.

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☒ Other Limited Liability Company

☐ Reinstatement

☐ Name Registration

☐ Change of R.A.

☐ Fictitious Name

☐ UCC Filing

☐ Certified Copy

☐ Photo Copies

☐ CUS

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

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Updater	DOC
Updater	
Verifier	
Acknowledgment	
Acknowledgment	DOC
W.P. Verifier	DOC

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Thank You!!!

Hope

L98000000306

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****250.00 ****250.00

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-03/12/98--01075--007

*****35.00 *****35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
98 MAR 12 PM 1:51

RECEIVED
98 MAR 12 PM 12:34
DIVISION OF CORPORATION

FILED
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DIVISION OF CORPORATIONS
98 MAR 12 PM 1:51

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of 6M SYSTEMS, 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 \$100.
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$0. A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is \$100. This total includes amounts from 2 and 3 above.


John J. Malloy

FILING FEE: \$ 250 for Articles of Organization and Affidavit

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**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: 6M SYSTEMS, L.L.C.

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

J.J. Malloy

(Name)

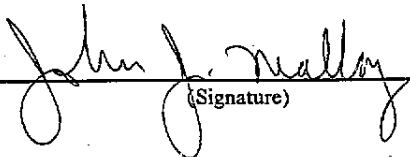
789 San Carlos Drive

(P.O. Box not acceptable)

Ft. Myers Beach, FL 33931

(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)

3/9/98
(Date)

FILING FEE: \$ 35 for Designation of Registered Agent

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REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept service of process for the above stated limited liability company at the address designated in this certificate pursuant to the provisions of section 608.415, Florida Statutes, 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.

By

John J. Malloy
John J. Malloy

3/9/98
(Date)

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