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CORPORATION NAME(S) AND DOCUMENT NUMB	SER(S) (if known):
Walk In: Mail Out Will Wait Photocopy	Pick Up Time RUSH	Certificate of Statisting Certificate of Good Statisting ARTICLES ONLY ALL CHARTER DOCS
Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A. Officer/D Change of Registered Agent Dissolution/Withdrawal Merger	irector Continue of FICTITIOUS NAME
Annual Report Fictitious Name Name Reservation Ordered By:	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other LLC	M V / / / / / / / / / / / / / / / / / /

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

98 DEC 22 PM 4: 30
SECRETARY OF STATE
AND A STATE OF STATE

ARTICLE I - Name:
The name of the Limited Liability Company is: 201 ECS Associates, LLC

ARTICLE II - Address:

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

201 East Center Street, Tarpon Springs, Florida 34689

ARTICLE M - Duration:
The period of duration for the Limited Liability Company shall be: December 31, 2080

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:

John Kokolakis (50%) 103 Buena Vista Drive Dunedin, Florida 34698 Pagona Kokolakis (50%) 103 Buena Vista Drive Dunedin, Florida 34698 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: vote by majority of existing members

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: vote by majority of existing members

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of	 -			
201 ECS Associates, LLC deposes and says:				
1) the above named limited liability company has at least two members	SECRET	98 DEC	 	
2) the total amount of cash contributed by the member(s) is \$\frac{20,000.00}{}.	SATE OF	22		
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.		PH 4: 30	 · · · · · · · · · · · · · · · · · · ·	
4) the total amount of cash or property anticipated to be contributed by member(s) is \$20,000.00 This total includes amounts from 2 and 3 above.				

Signature of a member of authorized representative of a member.

(In accordance with section 608.408(2) Plorida Statutes, the execution of this affidavit constitutes an affirmation under the perjury of perjury that the facts stated herein are true.)

John Kokolakis, Member

- - - - A Affidenit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING **THE REGISTERED** OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

l. The name of the limited liability company Is	· -
201 ECS Associates, LLC	
2. The name and address of the registered agent and office Is: John Kokolakis (Name) 103 Buena Vista Drive (P.O. Box not acceptable) Dunedin, Florida 34698 (City/State/Zip)	DEC 22 PM 4: 30 THE PARTY OF STATE THE PARTY OF ST

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 acting this capacity. I farther agree comply with the provisions of all statutes relating to the proper and complete performance of my duties, and / am familiar with and accept the obligations of my position as registered agent.

John Kokolakis (Signature) (Date)

FILING FEE: \$ 35 for Designation of Registered Agent