

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 Tallahassee, Florida 32302  
(850) 224-8870 • 1-800-342-8062 Fax (850) 224-1222

# L99000005468

Quality Supply, LLC

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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Signature \_\_\_\_\_

Requested by: CS

Name

Date

Time

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

Art of Inc. File \_\_\_\_\_

LTD Partnership File \_\_\_\_\_

Foreign Corp. File \_\_\_\_\_

☒ L.C. File \_\_\_\_\_

Fictitious Name File \_\_\_\_\_

Trade/Service Mark \_\_\_\_\_

Merger File \_\_\_\_\_

Art. of Amend. File \_\_\_\_\_

RA Resignation \_\_\_\_\_

Dissolution / Withdrawal \_\_\_\_\_

☒ Annual Report / Reinstatement \_\_\_\_\_

Cert. Copy \_\_\_\_\_

Photo Copy \_\_\_\_\_

Certificate of Good Standing \_\_\_\_\_

Certificate of Status \_\_\_\_\_

Certificate of Fictitious Name \_\_\_\_\_

Corp Record Search \_\_\_\_\_

Officer Search \_\_\_\_\_

Fictitious Search AK

Fictitious Owner Search \_\_\_\_\_

Vehicle Search 9/1/99

Driving Record \_\_\_\_\_

UCC 1 or 3 File \_\_\_\_\_

UCC 11 Search \_\_\_\_\_

UCC 11 Retrieval \_\_\_\_\_

Courier \_\_\_\_\_

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## ARTICLES OF ORGANIZATION

OF

**Quality Supply, LLC**

Each undersigned individual, being either a member or the authorized representative of a member, hereby presents these Articles of Organization to the Department of State of the State of Florida in accordance with Chapter 608, Florida Statutes, for the formation of a limited liability company under the laws of the State of Florida.

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### ARTICLE I

The name of the limited liability company (the "Company") is **Quality Supply, LLC**.

### ARTICLE II

Unless and until the Company is dissolved by the unanimous consent of the members or by law, the Company will exist in perpetuity from the date of the filing of these Articles with the Florida Department of State.

### ARTICLE III

The mailing address and street address of the Company's principal business office is:

8492 N.W. 17<sup>th</sup> Street, Suite L  
Miami, Florida 33126

#### ARTICLE IV

The name of the initial registered agent and the street address of the initial registered office are as follows:

Registered Agent

Harold L. Lewis

Address of Registered Office

One Biscayne Tower, Suite 3660  
2 South Biscayne Boulevard  
Miami, Florida 33131

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#### ARTICLE V

1. The members of the Company have the right to admit additional members from time to time. Additional members must be approved by all of the members and shall pay a capital contribution in an amount, if any, determined by the managers to be sufficient for admission.

2. The remaining members of the Company have the right to continue the business of the Company on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or any other event which terminates the continued membership of a member in the Company.

#### ARTICLE VI

The business of the Company is to be managed by a manager or managers. The names and street addresses of the managers who are to serve as managers until the first annual meeting of members or until their successors are elected and qualify are as follows:

Name

Street Address

Donald J. Kipnis	8491 N.W. 17 <sup>th</sup> Street, Suite L, Miami, Florida 33126
Lawrence L. Kibler	8491 N.W. 17 <sup>th</sup> Street, Suite L, Miami, Florida 33126

**ARTICLE VII**

The Company may exercise any powers, without limitation whatsoever, which a limited liability company may legally exercise under the laws of the State of Florida.

**ARTICLE VIII**

The Company may indemnify any manager, member, officer, employee or agent of the Company to the fullest extent permitted by Florida law.

IN WITNESS WHEREOF, the undersigned authorized representative of the Company has hereunto executed these Articles of Organization this 25 day of August, 1999.

  
Donald J. Kipnis, Managing Member

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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**ACCEPTANCE OF REGISTERED AGENT**

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.

  
HAROLD L. LEWIS

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**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS  
OF  
Quality Supply, LLC**

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STATE OF FLORIDA                     )  
                                                      ) SS.:  
COUNTY OF MIAMI- DADE         )

BEFORE ME, the undersigned, personally appeared Donald J. Kipnis, Managing Member of Quality Supply, LLC, being the limited liability company being formed hereunder, who, upon being duly sworn, hereby attests to the following, to the best of his knowledge and belief:

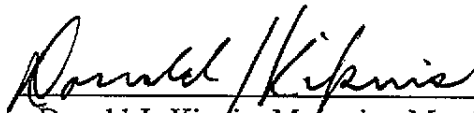
1. Donald J. Kipnis is a Managing Member of Quality Supply, LLC, the limited liability company being formed hereby, and is delivering this affidavit in such capacity.
2. Quality Supply, LLC, is a limited liability company which has at least one (1) member.
3. The total amount of cash to be contributed by all of the members is \$100.00.
4. The description and agreed upon value of property contributed by the members of property other than cash is as follows:

<u>Description</u>	<u>Agreed Upon Value</u>
None	not applicable

5. The amount anticipated to be contributed by the members may increase to a total of \$1,000.00.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true to the best of my knowledge and belief.



Donald J. Kipnis, Managing Member

STATE OF FLORIDA )  
 ) SS.:  
COUNTY OF MIAMI-DADE )

The foregoing instrument was acknowledged before me this 26 day of August, 1999 by Donald J. Kipnis, as Managing Member of Quality Supply, LLC, being the limited liability company being formed hereunder. He is personally known to the undersigned or has produced a Florida Driver's license as identification and did take an oath.

*Elizabeth J. White*

Notary Public, State of Florida

Print Name: ELIZABETH J. WHITE

My Commission Expires:



Elizabeth J White  
My Commission CC629770  
Expires April 22, 2001

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