

L250000 73278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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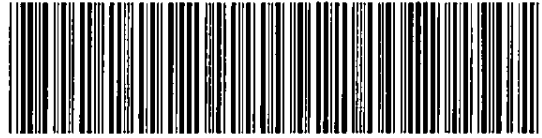
(Business Entity Name)

(Document Number)

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CLERK OF STATE
OF ARIZONA

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: PROTEK COMPANIES, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Edward B. Cohen, Esquire

Name of Person

Cohen Kotler, PA

Firm/Company

54 SW Boca Raton Blvd.

Address

Boca Raton, FL 33432

City/State and Zip Code

ecohen@cohenkotler.com

E-mail address:

For further information concerning this matter, please call:

Edward B. Cohen, Esquire 561 361-9600 Ext. 202
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|--|--|

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PROTEK COMPANIES, LLC

ARTICLE II - Address:

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

Principal Office Address:

1250 Wallace Drive – Unit B
Delray Beach, FL 33444

Mailing Address:

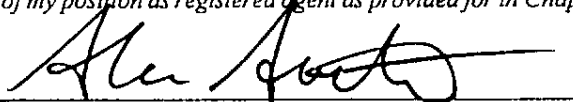
SAME

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Alan Austin
1250 Wallace Drive – Unit B
Delray Beach, FL 33444

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

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STATE OF FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

MGR


Alan Austin
3541 Pine Lake Court
Delray Beach, FL 33445

MGR

Andrew Aukstikalnis
62 Baytree Lane
Boynton Beach, FL 33436

ARTICLE V: Effective date, as of the filing date.

SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

ALAN AUSTIN

Typed or printed name of signee

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OFFICE OF THE CLERK
OF THE JUDICIAL STATE
OF FLORIDA