

L05000066367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

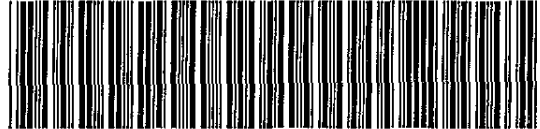
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200056426892

06/30/05--01024--017 \*130.00

FILED  
2005 JUN 30 PM 2:32  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN JUL -6 2005

# TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Superior Taxes, 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:

Christopher Brown  
(Name of Person)

Superior Taxes, LLC  
(Firm/Company)

3530 NW 211 St  
(Address)

Miami, Florida 33056  
(City/State and Zip Code)

FILED  
2005 JUN 30 PM 2:32  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Christopher Brown at ( 305 ) 343-9577  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy<br>(additional copy is enclosed) |
|--|---|--|---|

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Superior Taxes, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

2734 NW 183 St  
Suite 1C  
Miami, Florida 33056

**Mailing Address:**

3530 NW 211 St  
Miami, Florida 33056

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

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

Christopher Brown  
Name  
3530 NW 211 St  
Florida street address (P.O. Box **NOT** acceptable)  
Miami, Florida FL 33056  
City, State, and Zip

FILED  
2:35 JUN 30 PM 2:32  
DIVISION OF CORPORATIONS  
& BUSINESSES  
TALLAHASSEE, FLORIDA

*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 608, F.S..*

Christopher Brown  
Registered Agent's Signature

(CONTINUED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR \_\_\_\_\_

Christopher Brown

3530 NW 211 St

Miami, FL 33056

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FILED  
2008 JUN 30 PM 2:32  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

*Christopher Brown*

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

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

Christopher Brown

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)