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J. BRYAN

JUL -8 2011

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: MAN	IIFAJE, LLC.		
		d Liability Company	
	of Organization and fee(s) are s	_	A JUL -7 PM 1: 03
	Mirabal		SSEE
Roxana	Mirabal, P.A.	Name of Person	FLORIDI FLORIDI
		Firm/Company	
3650 NV	V 82 Avenue, PH 50	05	
		Address	
MIAMI, FL	ORIDA 33166		
	•	State and Zip Code	
RMPA@B	ELLSOUTH.NET	r future annual report notification)	
For further information	n concerning this matter, please	·	
To fature mornage	it concerning this matter, piease	can.	
Roxana Miraba	<u> </u>	at (305) 593-2011	
Nam	e of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount:		
]\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR'	ri	٦ī	F	ĭ	. 7	v.	o m	۵.
AK		Lal.	46.4		- 1	٦,	411	е:

The name of the Limited Liability Company is:

MANIFAJE, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

16485 Collins Avenue, WS8C

North Miami Beach, Florida 33160

16485 Collins Avenue, WS8C North Miami Beach, Florida 33160

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Roxana Mirabal, P.A.

3650 NW 82 Avenue, PH 505

Florida street address (P.O. Box NOT acceptable)

MIAMI, FLORIDA 33166 FL City, State, and 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 as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:	ESE !
"MGRM" = Managing Member		Fig
MGR	Jeronimo De La Torre	17 Out
	16485 Collins Avenue, WS8C	<u> </u>
	North Miami Beach, Florida 33160	
Member	Gabriela De La Piedra	
	16485 Collins Avenue, WS8C	
	North Miami Beach, Florida 33160	
Member	Pierina Bonilla	
	16485 Collins Avenue, WS8C	
	North Miami Beach, Florida 33160	
(Use attachment if necessary)		
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)	date of filing: (O	
REQUIRED SIGNATURE:	1	

(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. 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.)

Jeronimo De La Torre

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)