# L11000132895

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Office Use Only



500214083695

Effective Date 01/01/12

11/09/11--01023--009 \*\*160.00

FILED

NOV 21 PM 2: 28

SECRETARY OF STATE

ALLAHASSEF, FIRMA

W11.57294

J. BRYAN

NOV 2.2 2011

**EXAMINER** 



# FLORIDA DEPARTMENT OF STATE Division of Corporations

November 10, 2011

ELA M. LUGO LUGO LAW, INC. 927 S. RIDGEWOOD AVE., SUITE A-7 EDGEWATER, FL 32132

SUBJECT: MDI, LLC

Ref. Number: W11000057294



We have received your document for MDI, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

# Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is #L10000041793, MDI, LLC.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan

# **COVER LETTER**

Registration Section

TO:

Division of Corporations	
SUBJECT: Madison International Dev	relopment Group, LLC.
	ed Liability Company
	1 1 10 70
The enclosed Articles of Organization and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Ela M. Lugo Esa	DET ON .
Ela M. Lugo, Esq.	Name of Person
	Eron R
Lugo Law, Inc.	78 2
	Firm/Company
927 S. Ridgewood Ave	Suite A-7
<u></u>	Address
E El 00400	
Edgewater, FL 32132	/State and Zip Code
·	//State and Zip Code
lugolaw@gate.net  E-mail address: (to be used for	or future annual report notification)
For further information concerning this matter, please	call.
to runner mornation concerning and matter, prease	van.
Ela M. Lugo	at (386 ) 427-0059
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	·
\$125.00 Filing Fee \$130.00 Filing Fee &	\$155.00 Filing Fee & \$\sum \$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status & Certified Copy
	(additional copy is enclosed)
N. W	90 (90 ) 111
<u>Mailing Address</u> Registration Section	Street/Courier Address Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

# Madison International Development Group, 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:
927 S. Ridgewood Avenue	927 S. Ridgewood Avenue Suite A-7
Suite A-7	
Edgewater, FL 32132	Edgewater, FL 32132
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:  Effective Date 0//01/12
The name and the Florida street address of	the registered agent are:
Ela M. Lugo	
N	lame
927 S. Ridgewood	l Ave., Suite A-7
Florida stree	et address (P.O. Box NOT acceptable)
Edgewater	<sub>FL</sub> 32132
Cit	y, 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

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

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

Title:	Name and Address:	
"MGR" = Manager		and the same of th
"MGRM" = Managing Member		調査で
MGRM	Tanya Stiffler	類など
	927 S. Ridgewood Ave., Suite A-7	m t
	Edgewater, FL 32132	100 B
MGRM	Ela M. Lugo	75
	927 S. Ridgewood Ave., Suite A-7	2
	Edgewater, FL 32132	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>January 1, 2012</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

# **REQUIRED SIGNATURE:**

Signature of a member of in 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. 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.)

Ela M. Lugo

Typed of 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)