

Electronic Filing Cover Sheet 5

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(((H120001367973)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:		 	 

## FLORIDA LIMITED LIABILITY CO. A LITTLE LEAGUE LLC

Certificate of Status	0
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Estimated Charge	\$155.00

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Help

MAY 23 2012

https://efile.sunbiz.org/scripts/efilcovr.exe

5/22/2012

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EMPIRE CORP KIT

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ARTICLE I - Name			_
The name of the Lin		EFFECTIVE	
			23. 20/1E
	A LITTLE LEAGL		
(Must	end with the words Limited Lightli	lty Company, "L.L.C.," or "LLC,")	
ARTICLE II - Add	ress:		
The mailing address	and street address of the pri	incipal office of the Limited	d Liability Company is:
Principal Office Ad	dress:	Mailing Addressi	
	ET	4238 SW 147 CT	- <del></del>
MIAMI, FL 33125		MIAMI, FL 33185	nt's Signature 2
MIAMI, FL 33125  ARTICLE III - Reg (The Limited Liability Combusiness entity with an oct	istered Agent, Registered	MIAMI, FL 33185 Office, & Registered Age	nt's Signature
MIAMI, FL 33125  ARTICLE III - Reg (The Limited Liability Combusiness entity with an oct	istered Agent, Registered pany cannot serve as its own Registe ve Florida registration.)	MIAMI, FL 33185  Office, & Registered Age ord Agent. You must designate an increase agent are:	SEE OF T
MIAMI, FL 33125  ARTICLE III - Reg (The Limited Liability Combuniness entity with an oct	istered Agent, Registered pany common serve as its own Registr ve Florida registration.)	MIAMI, FL 33185  Office, & Registered Age ord Agent. You must designate an increase agent are:	SEE OF T
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Registered Agent's Signature (REQUIRE

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.

(CONTINUED)

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The name and address of each Manage	The name and address of each Manager or Managing Member is as follows:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address;		
MGR	MARIA E CARRERA		
<del></del>	4238 SW 147 CT		
	MIAMI, FL 33185		
MGR	ANN MARIE BRAVO		
	905 BRICKELL BAY DR # 1725		
	MIAMI, FL		
,			
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be s to or 90 days after the date of filing.)	ate of filing: 05/22/2012 (OPTIONAL) specific and cannot be more than five business days prior		
<u>required</u> signature:			

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

(In accordance with section 608.408(3), Plorida 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.)

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

MARIA E CARRERA Typed or printed name of signee

Finne 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)

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