## . LO20000853 G. Bodner 107-61 SW GO St. Miani, FL 33173

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CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	, (if known):
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CR2E031(7/97)

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(Corporation Name)	(Document #) 3000047583635 -01/08/0201023005
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NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other

Gabriel Bodner 107-61 S.W. 60<sup>th</sup> Street Miami, FL. 33173 (305) 271-9481

02 JAN -8 PH 12: 4:
SECRETARY OF STATE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: Market Shadow, LLC

ARTICLE I - Name:

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ARTICLE II - Address: The mailing address and street address of the mains.
The mailing address and street address of the principal office of the Limited Liability Company is:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Gabriel Robert
Gabriel Bodner Name
Florida street address (P.O. Box NOT acceptable)
Miani 22172
Miani FL 33173 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.
Golie Boshie
Registered Agent's Signature
- v
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more managers and is,
therefore, a manager - managed company.
(An additional article must be added if an effective date is requested)
Tolder Dear
Signature of a member or an authorized representative of a member.
(In accordance with section 608.40 8(3), Florida Statutes, the execution
of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Typed or printed name of signee
Typed or printed name of signee
Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)