L11000130014

(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

EFFECTIVE DATE 11/8/11

400214129904

11/14/11--01016--001 **125.00

FILED
11 NOV 14 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
NOV 15 2011
EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: 3 Mar 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:

Marva Smith-Riley
Name of Person

3 Mar LLC
Firm/Company

7505 Kimberly Blvd #128
Address

North Lauderdale, FL 33068
City/State and Zip Code

marvac@bellsouth.net
E-mail address: (to be used for future annual report notification)

FILED
11 NOV 14 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Marva Smith-Riley at (954) 292-5999
Name of Person — Area Code & Daytime Telephone 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

3 Mar 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:**
7505 Kimberly Blvd #128 North Lauderdale, FL 33068	7505 Kimberly Blvd #128 North Lauderdale, FL 33068

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:

Marva Smith-Riley
Name

7505 Kimberly Blvd #128
Florida street address (P.O. Box **NOT** acceptable)

North Lauderdale FL 33068
City, State, and Zip

FILED
11 NOV 14 PM 4:46
SECRETARY OF STATE
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..

Marva Smith-Riley
Registered Agent's Signature (REQUIRED)

(CONTINUED)

EFFECTIVE DATE 11/8/11

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	Marva Smith-Riley 7505 Kimberly Blvd #128 North Lauderdale, FL 33068
MGRM	Marsha-Gay Campbell-Harris 7505 Kimberly Blvd #128 North Lauderdale, FL 33068
MGRM	Marlon Keith Campbell 7505 Kimberly Blvd #128 North Lauderdale, FL 33068

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 11/8/2011. (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:

Marva Smith-Riley
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. 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.)

Marva Smith-Riley
Typed or printed name of signee

FILED
11 NOV 14 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)