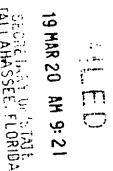
L19000019419

(Re	equestor's Name)				
(Ac	ddress)				
		_			
(Ac	ddress)				
(Ci	ity/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL MAIL			
(Bi	usiness Entity Na	me)			
(D	ocument Number)			
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					



500326368755

03/20/19--01011--027 **160.00 .



Office Use Only

N CULLIGAN MAR 2 7 2019

COVER LETTER

	New Filing Section Division of Corporations		
end isc.	MacKay investments LLC		
SUBJEC	Name of	Limited Liabil	ity Company
The enclo	sed Articles of Organization and fee(s)	are submitted	for filing.
Please ret	urn all correspondence concerning this	matter to the f	following:
	Francisco Machado		
		Name of	Person
		Firm/Co	mpany
	4811 S.W. 118 terr.		
		Addr	ess
	Cooper City, Fl. 33330		
	Mac64@hotmail.com	City/State an	d Zip Code
	E-mail address: (to be us	sed for future a	nnual report notification)
For further	information concerning this matter, ple	ease call:	
	Frank Machado	954	410-8092
	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	∟ J _{Certifi}	00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must co	ntain the words "Limited L	iability Compa	ny, "L.L.C.," or "LLC.")	•
ARTICLE II - Address: The mailing address and street	address of the principal of	ffice of the Limi	ted Liability Company is:	
	ipal Office Address:		Mailing Address:	
4811 S.W. 118th Terr Cooper City, Fl. 33330		48	4811 SW 118th Terr Cooper City, Fl. 33330	
The Limited Liability Compa	ny cannot serve as its own	Registered Agei	gent's Signature: nt. You must designate an individual or signate and individual or signate.	19 MA
(The Limited Liability Comparanother business entity with a	ny cannot serve as its own n active Florida registration	Registered Ager n.)	nt. You must designate an individual or 🤆 🔻	MAR 20 AM
(The Limited Liability Comparanother business entity with a	ny cannot serve as its own nactive Florida registration et address of the registered	Registered Ager n.)	nt. You must designate an individual or 🤆 🔻	MAR 20 AM
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an The name and the Florida street	ny cannot serve as its own nactive Florida registration et address of the registered	Registered Agei n.) agent are:	nt. You must designate an individual or 🤆 🔻	MAR 20
(The Limited Liability Comparanother business entity with a	ny cannot serve as its own n active Florida registration et address of the registered Francisco Machado	Registered Agern.) agent are: Name	nt. You must designate an individual or CARIO	MAR 20 AM
(The Limited Liability Comparanother business entity with a	ny cannot serve as its own nactive Florida registration et address of the registered Francisco Machado 4811 S.W. 118 terr	Registered Agern.) agent are: Name	nt. You must designate an individual or CARIO	MAR 20 AM

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "AMBR" ≃ Author	ived Member	Name and Address:			
"MGR" = Manager					
AMBR		Francisco Machado			
		4811 SW 118th Terrace			
		Cooper City, Florida 33330	····		
AMBR		Kay Hurley			
ANIBIN		4811 SW 118th Terrace			
		Cooper City, Florida 33330			
		occupation of the contract of	<u> </u>		
			75 T		
			m-c		
			Mg 3		
			70 g		
			<u></u>		
(If an effective date is listed the date of filing.)	this block does not meet the	ing: and cannot be more than five busines the applicable statutory filing requiremente's records.	ss days prior to or 90 days after		
ARTICLE VI: Other provisi	ons, if any.				
	Signature of a member is document is executed in	Mhaclo r or an authorized representative of a accordance with section 605.0203 (1)	(b), Florida Statutes.		
		rmation submitted in a document to the ny as provided for in s.817.155, F.S.	Department of State		
	Frank Machado				
	Туј	ped or printed name of signee			

The name and address of each person authorized to manage and control the Limited Liability Company:

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)