

LO106001106

Marika Csatory

Mero Fine Art Gallery LLC

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

200004439532--3
-06/25/01--01113--004
****125.00 ****125.00

W81-14282

June 20, 2001

Dear Sirs:

Attached please find my check for \$125.00 as a Filing Fee for Articles of Organization and Designation of Registered Agent.

Also, attached my application form for Filing my Articles of Organization.

Thanking you for your attention.

Regards

Marika Csatory

Marika Csatory
P.O. Box 1159 (Mailing Address)
Land O'Lakes, FL 34639-1159
813-909-8989
813-909-8787fax

21702 Mims Way
Lutz, FL 33549
813-909-8686

FILED
01 JUL 10 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mtu
7/10



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 27, 2001

MARIKA CSATARY
PO BOX 1159
LAND O LAKES, FL 34639-1159

SUBJECT: MERO FINE ART GALLERY LLC
Ref. Number: W01000014882

We have received your document for MERO FINE ART GALLERY LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6051.

Michael Mays
Document Specialist

Letter Number: 101A00038736

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mero Fine Art Gallery LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address: P.O. Box 1159, Land O'Lakes, FL 34639-1159

Street Address: 21702 Mims Way, Lutz, FL 33549

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Marika Csatory

21702 Mims Way ^{Name}

Lutz ^{Florida street address (P.O. Box **NOT** acceptable)}

FL 33549

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..

Marika Csatory
Registered Agent's Signature

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)

Marika Csatory
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.)

MARIKA CSATORY
Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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)