

LO20000007176

MICHAEL DISMORE, WSC  
P. O. Box 58224  
ST. PETERSBURG, FL 33715  
E-MAIL: MPDIZ/AOL 727-866-1052

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-03/25/02--01070--014  
\*\*\*\*130.00 \*\*\*\*130.00

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
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TALLAHASSEE, FLORIDA

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| <input type="checkbox"/> Walk in   | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
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**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

LO2-7176  
JR

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: MPDI Z LTD. Co.

**ARTICLE II - Address:**

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

PO BOX 58224, ST PETERSBURG FL 33715

637 PINELLAS BAYWAY #206, TIERRA VERDE FL 33715

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

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

MICHAEL DISMORE  
Name  
637 PINELLAS BAYWAY #206  
Florida street address (P.O. Box **NOT** acceptable)  
TIERRA VERDE FL 33715  
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, Florida Statutes.

MICHAEL DISMORE  
Registered Agent's Signature

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**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)

MICHAEL DISMORE  
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.)

MICHAEL DISMORE  
Typed or printed name of signer

**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)