

L020000011202

Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

margon llc

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION

TB

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITIES.

ARTICLE I - Name:

The name of the Limited Liability Company is: **MARGON LLC**

ARTICLE II - Address:

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

905 BRICKELL BAY DR. - UNIT 724
MIAMI, FLORIDA - 33131

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

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

ROBERTO EDGARDO MAISONNAVE
Name
10313 S.W. 120TH STREET
Florida street address (P.O. Box NOT acceptable)
MIAMI FL 33176
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.

[Signature]
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.

[Signature]
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.)

ROBERTO EDGARDO MAISONNAVE
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)

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