

L040000 12495

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000044065 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : PAUL SALVER, P.A.
Account Number : 120020000087
Phone : (954) 389-1333
Fax Number : (954) 389-1397

LIMITED LIABILITY AMENDMENT

MONKEY ENTERPRISES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

L04-12495

Electronic Filing Menu

Corporate Filing

Public Access Help

3/1/04 M

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAR -1 PM 4:06

RECEIVED
DIVISION OF CORPORATION
04 MAR -1 PM 10:47

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Monkey Enterprises, LLC.**ARTICLE II - Address:**

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

Principal Office Address:8790 S.W. 150 TerraceMiami, FL 33176**Mailing Address:**Same**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Carl Israel
Name8790 S.W. 150 Terrace
Florida street address (P.O. Box NOT acceptable)miami FLORIDA 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, Florida Statutes.

X Carl Israel
Registered Agent's Signature

APPROVED
AND
FILED
04 FEB 16 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

20 e MAIL

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

TITLE**Name and Address**

"MGR" = Manager

"MGRM" = Managing Member

mbrmCarl Ismael
840 SW 15th Terrace
Miami, FL 33134mbrElison Cox
3835 S. College Court
Fort Lauderdale, FL 33327mbrKathy Frank
P.O. Box 75
Carnabelle, FL 32322

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.**REQUIRED SIGNATURE**

Signature of a member or an authorized representative of a member.

(In accordance with section 603.409(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carl Ismael

Typed or printed name of signor

Filing Fee:

\$100.00 Filing Fee for Articles of Organization

\$ 15.00 Designation of Registered Agent

\$ 10.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

04 FEB 16 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDAFILED
AND
RECEIVED