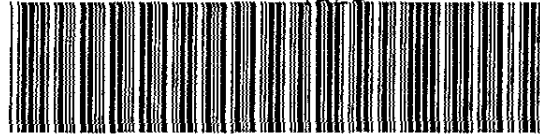


LO4000020546

04 MAR -8 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



800028921418

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

03/12/04--01005--010 **25.00

02/18/04--01018--002 **100.00

Special Instructions to Filing Officer:

W004-8179

Office Use Only

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

FILED

04 MAR -8 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 26, 2004

RICARDO MARTIN
3225 FRENCH AVE.
LAKE WORTH, FL 33461

SUBJECT: RICARDO MARTIN LLC
Ref. Number: W04000008179

We have received your document for RICARDO MARTIN LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 804A00013035

TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

04 MAR -8 PM 1:01

SUBJECT:

Ricardo Martin
(Name of Limited Liability Company)

26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ricardo Martin
(Name of Person)

TRIP
(Firm/Company)

3225 French AV.
(Address)

LAKE WORTH FL 33461
(City/State and Zip Code)

For further information concerning this matter, please call:

Ricardo Martin at 361 968 5913
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED

04 MAR -8 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Ricardo MARTIN L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

3225 French AV.
LAKE WORTH FL
33461

Mailing Address:

3225 French AV.
LAKE WORTH FL
33461

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

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

Ricardo martin

Name

3225 French Avenue

Florida street address (P.O. Box **NOT** acceptable)

Lake Worth FLORIDA 33461

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..

RL

Registered Agent's Signature

FILED

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

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

04 MAR -8 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR.

Ricardo Martin
3225 French Av.
Lake Worth 33461 FL.


MGRM

CARMEN RODRIGUEZ
3225 French Av.
Lake Worth FL 33461.

(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 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.)

Ricardo Martin

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)