

L040000042984

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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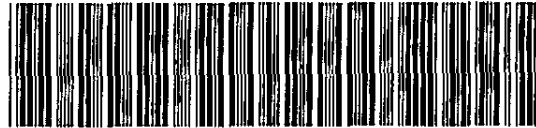
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 JUN -4 P 4:08

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mono Limited Liability Company
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Larry Mass
(Name of Person)

Mono Limited Liability Company
(Firm/Company)

111 Royal Pine Circle North
(Address)

Royal Palm Beach, Florida 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

Larry Mass at (561) 762-3712
(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

SECRETARY
TALLAHASSEE

2004 JUN 14 P 14:08

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mova Limited Liability Company

ARTICLE II - Address:

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

Principal Office Address:

111 Royal Pine Circle North
Royal Palm Beach, Florida
33411

Mailing Address:

111 Royal Pine Circle North
Royal Palm Beach, Florida
33411

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

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

LARRY MOSS
Name
111 ROYAL PINE CIRCLE NORTH
Florida street address (P.O. Box ~~NOT~~ acceptable)
ROYAL PALM BEACH FLORIDA 33411
City, State, and Zip

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TALLAHASSEE, FL
SECRETARY OF STATE

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.



Registered Agent's Signature

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

LARRY MOSS
111 ROYAL PINE CIRCLE NORTH
ROYAL PALM BEACH, FL. 33411

MGRM

LU ANN MOSS
111 ROYAL PINE CIRCLE NORTH
ROYAL PALM BEACH, FL. 33411

MGRM

Catherine E. North
3012 48th Ave. SE
Bradenton, FL 34203

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Catherine E. North
Signature of a member or an authorized representative of a member.

(In accordance with section 602.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Catherine E. North
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)

SECRET
TALLAHASSEE, FL

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ARTICLE V- Effective Date Requested:

JUNE 03, 2004

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SECRETARY OF STATE
TALLAHASSEE FL 32399