

L04000074151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900041692739

10/11/04--01056--019 **130.00

04 OCT 11 PM 8:11
LAWSON

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MINI MOGULS LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

JORGE L. PANEQUE
(Name of Person)

JORGE L. PANEQUE P.A.
(Firm/Company)

512-35TH STREET
(Address)

UNION CITY, NJ 07087
(City/State and Zip Code)

For further information concerning this matter, please call:

JORGE L. PANEQUE at (201) 867-8878
(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

04 OCT 11 AM 8:11
DIVISION OF CORPORATIONS

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

MINI MOGULS LLC

ARTICLE II - Address:

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

Principal Office Address:

4000 TOWERSIDE TERRACE

SUITE # 2112

MIAMI SHORES, FL 33138

Mailing Address:

512-35TH STREET

UNION CITY, NJ 07087

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

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

KELLEY V. MITCHELLE

Name

4000 TOWERSIDE TERRACE, SUITE # 2110

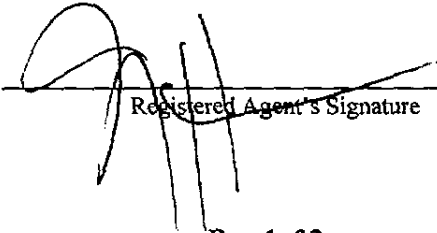
Florida street address (P.O. Box NOT acceptable)

MIAMI SHORES

FLORIDA 33138

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.



Registered Agent's Signature

04 OCT 11 11 130 40

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

KELLEY V. MITCHELLE

4000 TOWERSIDE TERRACE, SUITE # 2110

MIAMI SHORES, FL 33138

MGRM

GINA BARROSO

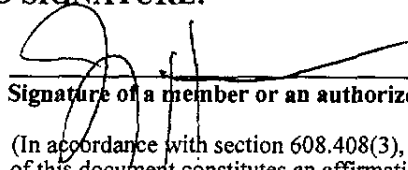
30 NE 105TH STREET

MIAMI SHORES, FL 33138

(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.)

JORGE L PANEQUE

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)

04 OCT 11 AM 8:11

Division of Corporations