

L05000002578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2005 JAN -7 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CYBER MARKET GROUP, 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:

PATRICK H. RAKOTONANAHARY
(Name of Person)

CYBER MARKET GROUP, LLC
(Firm/Company)

870 SILVER SPRING TER NW
(Address)

PORT CHARLOTTE, FL 33948
(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICK H. RAKOTONANAHARY at (571) 330-1109
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|--|--|

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[REDACTED]

870 SILVER SPRING TER NW
PORT CHARLOTTE, FL 33948
571-330-1109

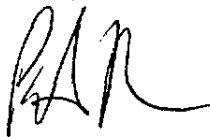
December 15, 2004

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

To whom it may concern:

My name is Patrick H. Rakotonanahary. Per your requirements for incorporation.
Enclosed please find Articles of Incorporation and check for \$160 for Filing fee,
Certified Copy and Certificate of Status.

Sincerely,



Patrick Rakotonanahary
President
Cyber Market Group, LLC

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2005 JAN - 7 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 28, 2004

PATRICK H. RAKOTONANAHARY
CYBER MARKET GROUP, LLC
870 SILVER SPRING TER NW
PORT CHARLOTTE, FL 33948

SUBJECT: CYBER MARKET GROUP, LLC
Ref. Number: W04000047078

We have received your document for CYBER MARKET GROUP, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the Managing Member is missing from Article IV.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 204A00071571

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2005 JAN -7 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CYBER MARKET GROUP, LLC

ARTICLE II - Address:

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

Principal Office Address:

870 SILVER SPRING TER NW
PORT CHARLOTTE, FL 33948

Mailing Address:

870 SILVER SPRING TER NW
PORT CHARLOTTE, FL 33948

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

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

PATRICK H. RAKOTONANAHARY

Name

870 SILVER SPRING TER NW

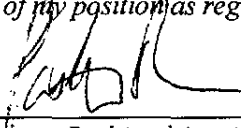
Florida street address (P.O. Box **NOT** acceptable)

PORT CHARLOTTE, FL 33948 FL

City, State, and Zip

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2005 JAN -7 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..



Registered Agent's Signature

(CONTINUED)

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

PATRICK RAKOTONANAHARY

870 SILVER SPRING TER NW

PORT CHARLOTTE, FL 33948

MGRM

CARLOS M. Simancas

870 Silver Spring ter NW

Port Charlotte, FL 33948

MGRM

LORENZO ALAN ESTRUCH

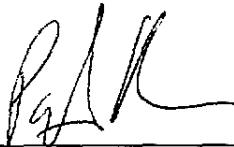
870 SILVER SPRING Terr NW

PORT CHARLOTTE, FL 33948

(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.)

PATRICK H RAKOTONANAHARY

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)