# L05000026322

(Req	uestor's Name)	
(Addı	ress)	
(Addi	ress)	
(City/	State/Zip/Phon	e#)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doct	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
		;

Office Use Only

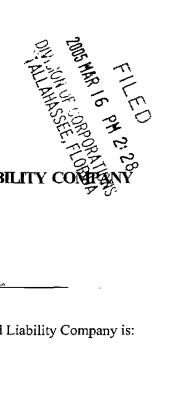


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TRANSMIT	TAL LETTER	
TO: Registration Section Division of Corporations		
SUBJECT: MDM Management, LLC		
	d Liability Company)	
The enclosed Articles of Organization and fee(s) are so	abmitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Tiouse total an correspondence concerning and mane	, to	
Shenika Moraldo		
(1)	Name of Person)	2005 HAR 16 PH 2: 28 2005 HAR 16 PH 2: 28 DIVISION OF CORPORATION DIVISION OF CORPORATION
0	Firm/Company)	是是
		7. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
6770 Indian Creek Drive, U	Init 5P	85 <b>(8</b>
	(Address)	75
Miami Beach, FL	33141	
	State and Zip Code)	<del></del>
For further information concerning this matter, please	call:	
Shanika Maralda	at ( 305 ) 799-2562	
Shenika Moraldo (Name of Person)	at (	elephone Number)
·		
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING A	ADDRESS:
Registration Section	Registration S	Section
Division of Corporations 409 E. Gaines Street	Division of C P.O. Box 632	Corporations 27
Tallahassee, Florida 32399		Florida 32314



## A

	RTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
		アゲ	
<b>ARTICLE 1 - Name</b>			
The name of the Limi	ited Liability Company i	s:	
MDM Management, LL	c		
ARTICLE II - Addr	ress:		
		principal office of the Limited Liability Company is:	
Principal Office Add	dress:	Mailing Address:	
6770 Indian Creek Driv	ve	6770 Indian Creek Drive	
Unit 5P		Unit 5P	
Miami Beach, FL 3314	1	Miami Beach, FL 33141	
The name and the ric	orida street address of the	· · · · · · · · · · · · · · · · · · ·	
_	Shenika Moraldo		
	Shenika Moraldo Nan	ne	
_	Nan		
_	Nan 6770 Indian Creek D		
	Nan 6770 Indian Creek D	rive, Unit 5P	
_ 	Nam 6770 Indian Creek D Florida street a	orive, Unit 5P  ddress (P.O. Box <u>NOT</u> acceptable)  FL 33141	

(CONTINUED)

### 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 Shenika Moraldo MGRM 6770 Indian Creek Drive, Unit 5P Miami Beach, FL 33141 **MGRM** Roger Moraldo 40 Brookledge Street Dorchester, MA 02121 (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.) Shenika Moraldo

#### 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)

Typed or printed name of signee