# 1050000 38972

(	Requestor's Name)	
(	Address)	
(	Address)	
(	City/State/Zip/Phone #)	i
PICK-UP	☐ WAIT	MAIL
(1	Business Entity Name)	
(1	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		



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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 3, 2005

MIGUELINA GABIRONDO 8095 NW 8TH ST #307 MIAMI, FL 33126

SUBJECT: MEGA ENTERPRISES LLC

Ref. Number: W05000011166

We have received your document for MEGA ENTERPRISES LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 905A00014939

# 05 APR 21 PH 12: 13

# TRANSMITTAL LETTER

TO: Registration S Division of C				
SUBJECT:	MEGA ENTERPRIS	SES LLC. I Liability Company)		
The enclosed Articles	of Organization and fee(s) are su			
Please return all corre	spondence concerning this matter	r to the following:		
	MIGUELINA GAE	BIRONDO Jame of Person)	<u></u>	
	(I)	Firm/Company)		
	8095 NW 8th	St. #307		
		(Address)	SECIL) TALLAH	00 10 11 6
		ORIDA 33126 State and Zip Code)		***
	(4-1)		DE S	1
For further information	n concerning this matter, please	call:	JIJAJE JIJOA	1. 1. 2. Lu
MIGUELINA GAB	IRONDO	305 801-7418		L.A_
(Na	ne of Person)	(Area Code & Daytime Te	elephone Number)	
Enclosed is a check	for the following amount:			
□ \$125.00 Filing Fe	e XX \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Reg Div 409	REET ADDRESS: distration Section dision of Corporations E. Gaines Street dahassee, Florida 32399	MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	

# FILED

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# **ARTICLE I - Name:**

The name of the Limited Liability Company is:

MEGA ENTERPRISES LLC

### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:	
8095 Nw 857 #307 Mami, Fl 3326	809(NW 85 #30 = 3 mami P 33106 = 3	
ADDICE E HE Decide of Acoust Decides	<u> </u>	
ARTICLE III - Registered Agent, Registere	d Office, & Registered Agent's Signature;	
The name and the Florida street address of the Miguelina	registered agent are:  Yabin M D	
Name	<del>*****</del> **	
8095 NW 8	857#307	
Florida street ac	dress (P.O. Box NOT acceptable)	
Mami	R 3326	
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, F.S..

Registered Agent's Signat

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member				
MGR	Migueling GABIRONDO 8095 nw 85/ #307			
	8095 NW 857 #307			
	Miami, El 33126			
MGRM	Raul tornel			
•	8695 NW 857 #367			
	Many 01 33100			
MGRM	Hi6vel Melendez			
	809[ NW 85T + 307			
1	1111ami H 32126			
<u> </u>	-n/A			
•				
	TANK STATE			
(Use attachment if necessary)				
• / -	<u> </u>			
NOTE: An additional article must be added if an effective date is requested.				
REQUIRED SIGNATURE:	SI.			
^				
Iniculing galironda				
Signature of a member or an authorized representative of a member.				
(In accordance with section	n 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.)

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)

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