## LO 50000 48762

(Requestor's Name)	_
(Address)	<u>.</u>
(Address)	_
	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
SI,	
Office Use Only	V



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## TRANSMITTAL LETTER

TO: Registration Se Division of Co					
SUBJECT: Me	ric International, L (Name of Limite		npany)		<u></u>
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for fill	ing.		
Please return all corresp	ondence concerning this matte	r to the followi	ng:		
<u>Richa</u>	rd Proctor	Name of Person)			
	O	Firm/Company)			
3300	NE 191st Street #180	7 (Address)			
<u>Aven</u>	tura, Florida 33180- (City/	2448 State and Zip Co	de)	-	· .
For further information	concerning this matter, please	call:			OS MAI SECRE
Richard Pro (Name	ctor of Person)	at ( 702 (Area C	610-6046 ode & Daytime Te	elephone Number)	SECRETARY OF STATE
Enclosed is a check for	or the following amount:				
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Certified Co (additional cop		■ \$160.00 Fi Certificate of Certified Cop (additional copy	iling Fee, Status &
STREET ADDRESS: Registration Section			MAILING A		

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
Meric International, Ltd. Co.			
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
3300 NF 191st St. #1807 Aventura, FL	3300 NE 191st St. #1807 Aventura, FL		
33180-2448	33180-2448		
The name and the Florida street address of the Richard Proctor  Name			
3300 NE 191st St. #18	207		
Florida street ad	dress (P.O. Box NOT acceptable)		
Aventura	FL 33180-2448		
City, State, and Zip			
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all verformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S		
Registered Agent	's Signature		

(CONTINUED)

# OSHAY IO AMII:

### 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	
MGRM	Richard Lee Sutter Proctor
(Use attachment if necessary)	· · · · · · · · · · · · · · · · · · ·
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
12	14
- Collans	lett one
Signature of a membe	r or an authorized representative of a member.
	ction 608.408(3), Florida Statutes, the execution states an affirmation under the penalties of perjury terein are true.)
Richard Lee	Sutter Proctor
Ty	ped or printed name of signee

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)