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Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number · (850)205-0383

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

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LIMITED LIABILITY COMPANY

M.M. PROPERTY INVESTMENTS LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

J. BAYMAN JUL - 7 2005

ARTICLE 1 - Name: The name of the Limited Liab	Ity Company is:
M.M. PROPERTY INVESTMEN	LLC.
ARTICLE II - Address: The mailing address and stree	address of the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
8280 SW 182ND STREET	8260 SW 182ND STREET
MIAMI, FL 33157	
RTICLE III - Registered /	MIAMI, FL 33157 Lent, Registered Office, & Registered Agent's Signature: Address of the registered agent are:
RTICLE III - Registered /	ent, Registered Office, & Registered Agent's Signature: address of the registered agent are:
RTICLE III - Registered A	ent, Registered Office, & Registered Agent's Signature:
RTICLE III - Registered A	ent, Registered Office, & Registered Agent's Signature: address of the registered agent are: MERCED MARTINEZ
RTICLE III - Registered A	ent, Registered Office, & Registered Agent's Signature: address of the registered agent are: MERCED MARTINEZ Name
RTICLE III - Registered /	ent, Registered Office, & Registered Agent's Signature: address of the registered agent are: MERCED MARTINEZ Name 8280 SW 182ND STREET
ARTICLE III - Registered A	ent, Registered Office, & Registered Agent's Signature: address of the registered agent are: MERCED MARTINEZ Name 8280 SW 182ND STREET Florida street address (P.O. Box NOT acceptable)

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(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of cach Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager	્ર 😕
"MGRM" = Managing Member	
MGR	MERCED MARTINEZ
. ,	8260 SW 182ND STREET
	MIAMI, FL 33157
MGR	LEOVALDO MARTINEZ
	6900 NW 179 STREET, APT 202
	HIALEAH, FL 33016
	O D
	
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(Use attachment if necessary)	•
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
mund	His an authorities of some of a more how

(In accordance with section 602,408(3), Florids Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MERCED MARTINEZ
Typed or printed name of signee

Piling Fees:

5126-90 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.06 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

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