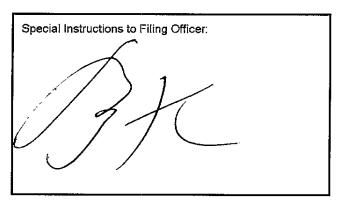
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(Requestor's Name)		
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PICK-UP	WAIT MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies C	ertificates of Status	



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Holland & Knight LLP Requester's Name		
315 So. Calhoun Street Address		
425-5675 City/State/Zip Phone #		Office Use Only nown):
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CORPORATION NAME(S) & DOCUM		nown):
44		
2. (Corporation Name)	(Document #)	<del>- a company de la company de </del>
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☐ Walk in ☐ Pick up time		Certified Copy
☐ Mail out ☐ Will wait	☐ Photocopy	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	The second secon
Profit Not for Profit Limited Liability Domestication Other	Amendment  Resignation of R.A.  Change of Registere  Dissolution/Withdra  Merger	ed Agent
OTHER FILINGS	REGISTRATION/QUA	ALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	
		Examiner's Initials

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compar	ny is:	
		,
MOKOTOFF ENTERPRI	SES. LLC	5 1
(Must end with the words "Limited Liability Company,"		3 7
ADDITION OF THE ASSE	75.72 75.72	9
ARTICLE II - Address:	he principal office of the Limited Liability Cor	, <b>3</b>
The maning address and street address of t	ne principal office of the Elithica Elability Col	Thattions:
Principal Office Address:	Mailing Address:	がる
123 - 14th Avenue N.E.	123 - 14th Avenue N.E.	
St. Petersburg, FL 33701	St. Petersburg, FL 33701	-
	· · · · · <u> </u>	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	tered Office, & Registered Agent's Signature Registered Agent. You must designate an individual or another the registered agent are:	<b>e:</b> er
David M. Mokoto	ff	
1	Name	•-
123 - 14th Ave	enue N.E.	
Florida stre	et address (P.O. Box <u>NOT</u> acceptable)	,
St Petershuro	FL 33701	
City, S	tate, and Zip	
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple	ed to accept service of process for the above state of in this certificate, I hereby accept the appointm pacity. I further agree to comply with the provisi the performance of my duties, and I am familiar v registered agent as provided for in Chapter 608	nent as ions of all vith and
Tuin 19	Mokor)	٠
Registered Agent's S	Signature (REQUIRED)	• .

(CONTINUED) Page 1 of 2

## 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	Denise Ann Ardelean
	123 - 14th Avenue, N.E. St. Petersburg, FL 33701
(Use attachment if necessary)	
TICLE V: Effective date, if other than the an effective date is listed, the date must lor 90 days after the date of filing.)	e date of filing: November 30, 2005 OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a memb	oer or an authorized representative of a member.
(In accordance with so	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

Denise ann Ardelean
Typed or printed name of signee