

L05000115813
FILED

Florida Department of State

Division of Corporations
Public Access System

2005 DEC -2 A 11: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000276777 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088RECEIVED
05 DEC -2 AM 11:01
DIVISION OF CORPORATION**LIMITED LIABILITY COMPANY****M&K Development LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$130.00 |

AL[Electronic Filing Menu](#)[Corporate Filing](#)[Public Access Help](#)

FILED

2005 DEC -2 A 11: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLES OF ORGANIZATION
FOR****FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name**The name of the Limited Liability Company is: **M&K Development 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:**724 E. Gulf Boulevard, Suite C724 E. Gulf Boulevard, Suite CIndian Rocks Beach, FL 33785Indian Rocks Beach, FL 33785**ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature**

The name and Florida street address of the registered agent are:

Joseph MazzaraName724 E. Gulf Boulevard, Suite C(P.O. Box or Mail Drop Box NOT Acceptable)Indian Rocks Beach, FL 33785

(City / State / 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 Signature - Joseph Mazzara

H05000276777

FILED

2005 DEC -2 A 11: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FL 33705

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Semyon Kantor- 4051 Mirimar Way S., St. Petersburg, FL 33705

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Semyon Kantor

Typed or printed name of signee