

Jan. 3. 2006 10:50AM  
DIVISION OF CORPORATIONS

No. 102 ag 1f1

**L060000000816**

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

From:

Account Name : GERALD WEINBERG, P.C.  
Account Number : I20030000043  
Phone : (800) 342-9856  
Fax Number : (800) 354-3381

**FLORIDA/FOREIGN LIMITED LIABILITY CO**

MVLM, LLC

*8114*

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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(H06000000284 3)

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

MVLM, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

20835 NE 31ST PLACE  
AVENTURA, FLORIDA 33180

**Mailing Address:**

20835 NE 31st Place  
Aventura, FL 33180

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

JAY POLLAK

Name

20835 NE 31ST PLACE

Florida street address (P.O. Box NQT acceptable)

AVENTURA, FLORIDA 33180

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 Signature

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Page 1 of 2

(H06000000284 3)

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**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:**

MGR

JAY POLLAK

20835 NE 31ST PLACE

AVENTURA, FLORIDA 33180

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(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**



Signature of a member or an 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.)

JAY POLLAK

Typed or printed name of signer

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