## 10000035376

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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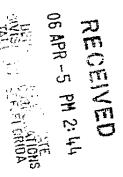
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SECRETARY OF STATE
ALLAHASSEE, FI ORIGA



## **COVER LETTER**

TO: Registration Se Division of Cor				
SUBJECT: MO	tivating Mi	nocity Mind Liability Company)	ds LLC	
The enclosed Articles of	·  Organization and fee(s) are so	ubmitted for filing.		
Please return all correspondent	ondence concerning this matte	r to the following:		
m	ichael m	losley/ Name of Person)		
Motivating Minority minds				
2303 Forest Hill Rd (Address)				
JACKSONVILLE Florida 32208				
	(City/	State and Zip Code)		
For further information concerning this matter, please call:				
Michael	Mosley of Person)	at (904) 983 (Area Code & Daytime T	- 8454	
(	,	(. 132 coa a bayamo 1	oophone (tumber)	
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy. (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Motivating Minor (Must end with the words "Limited Hability Company, "Limited	d Company" or their abbreviation "L.L.C," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5Acksonville Fl. 32208	2308 Forest Hill Rel JACKSOMVIII e Fl. 32208
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registation.)  The name and the Florida street address of the remaining the following street address of the remaining the following street address of the remaining the following street address of the remaining street add	ered Agent. You must designate an individual or another

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..

City, State, and Zip

Registered Agent's Signature (REOUIRED)

(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 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) Typed or printed pame of signee

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

\$ 5.00 Certificate of Status (Optional)

Filing Fees: