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TALLAHASSEE, FLORIDA

J. BRYAN APR 1 1 2006

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MARRERO REAL ESTATE BROKERAGE LLC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOSE RAU MARRERO
(Name of Person)
MARRE RO REAL ESTATE BROKERAGE LECT
3232 DEW CT KISSI MMEE, FIE
34744-9444
(City/State and Zip Code)
For further information concerning this matter, please call:
JOSE RAUL MARRERO at (407) 436-5140 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S125.00 Filing Fee \$\begin{align*} \text{\$\text{\$130.00 Filing Fee} & \text{\$\}\$\$}}\$}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Street/Courier Address Registration Section Division of Corporations Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
MAPPERO REAL ESTATE BOOKERAGE LLC. (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company St.			
Principal Office Address: Mailing Address:			
Suite 208 1633 east 3232 DEW CT Vine 5t. Kissimmee Fl, 34744-3550 34744-9444			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:			
JOSE RAUL MARRERO Name			
3232 DEW CT			
Florida street address (P.O. Box NOT acceptable)			
KISSIMMEE FL 34744 - 9444 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			
AM Alman			
Registered Agent's Signature (RECUIRED)			
(CONTINUED) Page 1 of 2			
Tugic 1014			

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

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

<u>Title:</u> "MGR" = Manager "MGPM" = Manager	Name and Address:
"MGRM" = Managing Member MGR	MYRIAM CRUZ 3232 DEW CT KISSIMMEE FI 34744
	<u> </u>
	THE
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the d If an effective date is listed, the date must be so or 90 days after the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
D	\cap

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 name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)