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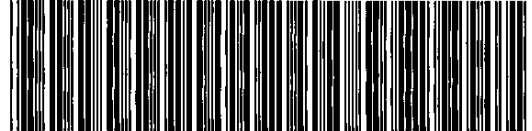
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7/12/06 JOSE

Berta M. Sanders, CPA.

Requestor's Name

9550 NW 77 AVENUE #3

Address

Hialeah Gardens, FL 33016

City

State

ZIP

Phone

305-512-3782

VALIDATION ONLY

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TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

Micherinos, L.L.C.

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| <input type="checkbox"/> Profit              | <input type="checkbox"/> Amendment       | <input type="checkbox"/> Merger                      |
| <input type="checkbox"/> NonProfit           |  |  |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Dissolution     | <input type="checkbox"/> Mark                        |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report   | <input checked="" type="checkbox"/> Other <u>LLC</u> |
| <input type="checkbox"/> Reinstatement       | <input type="checkbox"/> Reservation     | <input type="checkbox"/> Change of Registered Agent  |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photo Copies    | <input type="checkbox"/> Certificate Under Seal      |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30                  |
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# **ARTICLES OF ORGANIZATION OF**

**MICHERINOS, L.L.C.**

*The undersigned, desiring to form a Limited Liability Company pursuant to the provision of the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes (the "Act") hereby adopt the following Articles of Organization:*

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TALLAHASSEE FLORIDA

## **ARTICLE 1 – Name:**

The name of the Limited Liability Company is:

**MICHERINOS, L.L.C.**

## **ARTICLE 2 – Address:**

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

**1121 Fairlake Trace, Suite 2406  
Weston, FL 33326**

## **ARTICLE 3 – Duration:**

The period of duration for the Limited Liability Company shall commence upon the filing of these Articles of Organization with the Florida Department of State, and shall continue perpetually:

## **ARTICLE 4 – Management:**

The Limited Liability Company is to be managed by a Manager of a Board of Management and the names and addresses of the initial managers who are to serve as managers are:

**Julio Marengo, a managing member**  
1121 Fairlake Trace, Suite 2406  
Weston, FL 33326

**Patricia Arboleda, a managing member**  
1121 Fairlake Trace, Suite 2406  
Weston, FL 33326

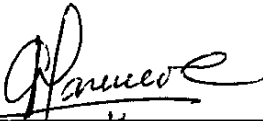
## **ARTICLE 5 – Admission of Additional Members:**

No additional members shall be admitted to the Limited Liability Company without unanimous consent of all the other members, whose consent shall be given or withheld in the sole and absolute discretion of the other members.

## **ARTICLE 6 – Member Rights to Continue Business:**

The management or the members of the Limited Liability Company to continue the business of the Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be established by the regulations of the Limited Liability Company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of  
Organization as of the 11th day of July, 2006.

  
\_\_\_\_\_  
Julio Marenco, a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes  
and affirmation under penalties of perjury that the facts stated herein is true.)

**CERTIFICATE OF DESIGNATION REGISTERED  
AGENT/REGISTERED OFFICE**

Pursuant To the provisions of sections 608.415 or 608.507, Florida statutes, the undersigned Limited Liability Company, submits the following statement designation the registered office/registered agent, in the State of Florida.

1. The name of the Limited Liability Company is: **MICHERINOS, L.L.C.**
2. The name and address of the registered agent and office is:

**Berta M. Sanders  
9550 NW 77 Avenue  
Hialeah Gardens, FL 33016**

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.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

7/11/06