# Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: M. YOUSUF USMAN Account Name Account Number: 072100000231

Phone : (305)477-6767

Fax Number

: (305)477-1070

ÉLORIDA/FOREIGN LIMITED LIABILITY CO.

#### M & N INTERNATIONAL LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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Corporate Filing Menu

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09/11/06 -

## **COVER LETTER**

TO:	Registration Se Division of Co					
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		Organization and fee(s) are s	_			
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	M. YOUSU	· <u></u>		<u>,,</u>		<del></del> _
		(	Name of Person)			
			`			<del></del>
		(	(Firm/Company)			
	8180 N.W	. 36TH ST. #309				
		,	(Address)	0 S 34	± 5 °	* 1.
•	MIAMI FL					
•	•	(City	/State and Zip Code	·	· · · · · · · · · · · · · · · · · · ·	
For fu	ther information	concerning this matter, please	call;			
M. Y	OUSUF USI	MAN	at (305)	477-676		
<del></del>	(Name	of Person)	(Area Code	& Daytime To	olophone Number)	·
Enclo	sed is a check fo	r the following amount:				
\$12:	5.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	r	\$160.00 Filing Certificate of Stat Certified Copy (additional copy is en	us &
	•	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bo 2661 Exe	orier Addression Section of Corporation utilding cutive Center ee, FL 32301	nz.	

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Con	mpany is:
M & N INTERNATIONAL LLC	
(Must end with the words "Limited Liability Comp	pany, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1147 N.W. 22ND ST.	P.O. BOX 420491
MIAMI FL 33127	MIAMI FL 33242

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:

Florida street address of the registered agent are:

NOOR MOHAMED

Name

1147 N.W. 22ND ST.

Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33127

FL

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 (REQUIRED)

(CONTINUED)
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FROM: ,...

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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:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Memb	Det.	
MGRM	MAJID RASHIDZADA	
	1147 N.W. 22ND ST.	
	MIAMI FL 33127	
MGRM	NOOR MOHAMED	
	1147 N.W. 22ND ST.	
	MIAMI FL 33127	
		-
(Use attachment if necessary)		
	A Destruction 00 0000 (Approximate	
ARTICLE V: Effective date, if other	than the date of filing: September 08, 2006 (OPTION	
to or 90 days after the date of filing.	e must be specific and cannot be more than five business d	says befor
to or you ays after the date of ming.	,	
	·	
<u>REQUIRED</u> SIGNATURE	:	
	Λ AZE	90
N .	JOHNMANNOR SE	96 SEP
Signature of	a member or an authorized representative of a member.	لد ہے
(In accordan	ce with section 608.408(3), Florida Statutes, the execution	= =
of this docum	nent constitutes an affirmation under the penalties of perjury	<b>₹</b> 0
NOOR MO		WH 8: 40
NOCH IVIO	Typed or printed name of signee	<u></u>
	<b>S</b> m	Ö
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)

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