

Division of Corporations

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : WOLFE & GOLDSTEIN, P.A.
 Account Number : I20060000132
 Phone : (305)381-7115
 Fax Number : (305)381-7116

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

MyCircles.com, LLC

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DIVISION OF CORPORATION

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MyCircles.com, 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:

INIRIDA CERVANTES

(Name of Person)

Wolfe & Goldstein, P.A.

(Firm/Company)

100 S. E. Second Street, Suite 3300

(Address)

Miami, Florida 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

INIRIDA CERVANTES

(Name of Person)

305

(Area Code & Daytime Telephone Number)

381-7115 x 25

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| ☐ \$125.00 Filing Fee | ☐ \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | ☒ \$160.00 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MyCircles.com, 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 is:

Principal Office Address:

5347 SW 34 Way
Fort Lauderdale, Florida 33312

Mailing Address:

5347 SW 34 Way
Fort Lauderdale, Florida 33312

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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:

Richard C. Wolfe, Esq.
WOLFE + Goldstein, P.A.
100 S. E. Second Street, Suite 3300
Florida street address (P.O. Box **NOT** acceptable)
Miami, FL 33131
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, P.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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Leon Gomez - MGRM 62.5%
5347 SW 34 Way
Fort Lauderdale, Florida 33312

Bella Consulting, Inc - MGR. 17.5%
328 Arline Avenue
Deptford, New Jersey 08096

Henrik Kjaer- MGR. 10%
Elsterweg 42
91091 Grossenseebach
Germany

Anthony Rojas 5%
16478 N.E. 27 Place
North Miami Beach, Florida 33160

Handy Randy Services, LLC 2.5%
1820 SW 47 Street
Cape Coral, Florida 33914

Gabriel Adolfo Hubermann 2.5%
Salgado Oeste 420
Lobos, Provincia de Buenos Aires
Argentina 7240

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TALLAHASSEE, FLORIDA

Exhibit "A"

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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:

SEE EXHIBIT "A"

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TALLAHASSEE, FLORIDA

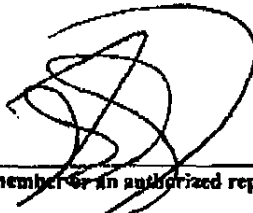
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October 6, 2006 (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.)

Leon Gomez

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)

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