

L06000123254

(Requestor's Name)

(Address)

(Address)

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☐ PICK-UP

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(Business Entity Name)

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EFFECTIVE DATE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
SUFFICIENCY OF FILING

06 DEC 29 PM 3:21

2006 DEC 27 AM 10:33

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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EXPRESS CORPORATE FILING SERVICE INC.

Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101

Address

CORAL GABLES, FL 33134

City/State/Zip

(305) 444-4994

Phone #

EFFECTIVE DATE

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CLERK OF STATE
TALLAHASSEE, FLORIDA
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OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Intelligent Investments, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 27, 2006

EXPRESS CORPORATE FILING SERVICE

TALLAHASSEE, FL

SUBJECT: INTELLIGENT INVESTMENTS, LLC
Ref. Number: W06000055198

EFFECTIVE DATE
11/1/07

RECEIVED
06 DEC 29 AM 10:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
06 DEC 29 PM 3:21
TALLAHASSEE, FL

We have received your document for INTELLIGENT INVESTMENTS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

If it is your intention to form an LIMITED LIABILITY COMPANY, then please revise your documents eliminating all references to "corporation" and "incorporation" and "officers" and "stock" and "directors" and "incorporators".

To form a Limited Liability Company, you file a document titled "ARTICLES OF ORGANIZATION."

If it is your intention to form a CORPORATION, then the name must contain a CORPORATE SUFFIX. You cannot use "LLC". And the name "INTELLIGENT INVESTMENTS, INC." would NOT be available since we already have a corporation with a similar name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 406A00072652

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

INTELLIGENT INVESTMENTS, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

EFFECTIVE DATE
1/1/07

FILED
06 DEC 29 PM 3:21
CLERK OF CIRCUIT
JAILL HASSELL, CLERK
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

545 N.W. CORTINA LANE
PORT SAINT LUCIE, FL 34986

Mailing Address:

545 N.W. CORTINA LANE
PORT SAINT LUCIE, FL 34986

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:

MIGUEL V. INCLAN

Name

545 N.W. CORTINA LANE

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

PORT SAINT LUCIE FL 34986

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)

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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

MIGUEL V. INCLAN

545 N.W. Cortina Lane
Port Saint Lucie, Florida 34986

MGRM

MIGUEL P. INCLAN

545 N.W. Cortina Lane
Port Saint Lucie, Florida 34986

MGRM

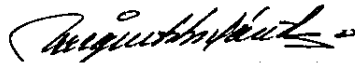
JAVIER P. INCLAN

526 S.W. Lake Manatee Way
Port Saint Lucie, Florida 34986

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: JANUARY 1, 2007. (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.)

MIGUEL V. INCLAN

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)