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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Marlinda Properties INC (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:			
MARK E Bell			
(Name of Person)			
Marlinda Properties Inc.			
343 N.W 19 5+. (Address)			
Hmstd Fl 33030			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
MARK BELL at (305) 245-4291			
(Name of Person) (Area Code & Daytime Telephone Number)			

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



February 9, 2007

MARK E. BELL 343 NW 19 STREET HOMESTEAD, FL 33030

SUBJECT: MARLINDA PROPERTIES INC.

Ref. Number: W07000006891

We have received your document for MARLINDA PROPERTIES INC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 107A00009973

Linda

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:  MONTINGA Properties.	.LLC
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:
Principal Office Address:  343 NW 19 54  1-1m3d T1, 33030  ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register.	
MARK E BE Name 343 N.W 19 5+ Florida street address (P.O. Box	SECRULARY UP STATE TALLAHASSEE, FLORIDA  NOT acceptable) FLORIDA  33030

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

۸	RTICLE	IV.	Manager(s)	or	Managing	Member	N	١
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The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" – Manager "MGRM" – Managing Member	Name and Address:
MGRI - Ivialiaging Weilings	MARK E Bell 303 N.W 19.0+ Hm5td Fl 33030
MCRM	LYNDA BELL 343, NW 19.3t Hmstd FL 330.30
· 	
(Use attachment if necessary)	

NOTE: An additional article must be added if an effective date is requested.

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.)

Mark E. Bell
Typod or printed name of signee

Filing Fees:

✓ S100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE