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COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: MTM Ice I, 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: Michael T. Macik (Name of Person) MTM Ice I, LLC (Firm/Company) 12351 Water Oak Drive (Address) Estero, FL (City/State and Zip Code) For further information concerning this matter, please call: Miles T. Macik (Name of Person) Enclosed is a check for the following amount: ☐ \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: MTM Ice I, 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: **Mailing Address:** 12351 Water Oak Drive 12351 Water Oak Drive Estero, FL 33928 Estero, FL 33928 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: Michael T. Macik Name 12351 Water Oak Drive Florida street address (P.O. Box NOT acceptable) FL 33928 City, State, and Zip Estero

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-	Manageri	(e) or	Managing	Member	(2):
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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> "MGR" = Manag "MGRM" = Man		Name and Address:		
MGRM	<u></u>	Michael T. Macik 12351 Water Oak Drive Estero, FL 33928		
MGRM		Miles T. Macik 237 Four Seasons Drive Lake Orion, MI 48360		
(Use attachment	if necessary)			
ARTICLE V: Effective	date, if other than the dated, the date must be sate of filing.)	ate of filing: (especific and cannot be more than five bu	OPTIONALE) siness days pr FLORIDA	
	Michae	et micos		
	Signature of a member of	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.)				
	Michael T. Macik	d 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)