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Certified Copies	Certificates	of Status
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EPFECTIVE DATE 30/07

DIVISION OF CORPORATIONS 07 APR -2 PM 12: 54

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Office Use Only

### **COVER LETTER**

TO: **Registration Section Division of Corporations** 

<u>thotography</u> and SUBJECT (Name of Lignited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

いたり (Name of Person) (Firm/Company) 11 01 KO 1/2 d (Address) OT NPR-2 313 miami (City/State and Zip Code)

For further information concerning this matter, please call:

PH 12: 54 maria 110 (Name of Person)

Enclosed is a check for the following amount:

SI25.00 Filing Fee & S130.00 Filing Fee & Certificate of Status

S155.00 Filing Fee & Certified Copy (additional copy is enclosed)

S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

3/30/07

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:



### **ARTICLE II - Address:**

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

Principal	Office Address:

540

miami

### **Mailing Address:**

# 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:

H. Brito Name VW 57 COULT Florida street address (P.O. Box NOT acceptable) NUC Miami, FL City, State, and Zip 33126

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.

martha Brito Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

### **ARTICLE IV- Manager(s) or Managing Member(s):**

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j.

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
Maria D. Brito, MGR	Maria D. Brito 540 Brichall Key Drive, Suite 1624 miami, FL 33131	
Martha A. Brito, MGRM	Martha A, Brito 425 NW. 57 Ct. Miami, FL 33131	
\	07 APR -2	
(Use attachment if necessary)	PH 12: 54	
	1. 107	
<b>ARTICLE V:</b> Effective date, if other than the date of filing: $3300$ (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.)

SITT 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)