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## Florida Department of State Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number : 072450003255 : (305)634-3694 Phone Fax Number : (305)633-9696

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### praven group, llc

Certificate of Status	
Certified Copy	1
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

I of 1

P.01/04

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April 4, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: PRAVEN GROUP, LLC

REF: W07000015573

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Agnes Lunt Document Specialist FAX Aud. #: H07000082413 Letter Number: 107A00022835

P.O BOX 6327 - Tallahassee, Florida 32314

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PRAVEN GROUP, LLC.

ARTICLE II - Address:

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

1000 N. HIATUS ROAD SUITE 106 PEMBROKE PINES, FL 33026

Principal Office Address:

Mailing Address:

1000 N. HLATUS ROAD SUITE 106 PEMBROKE PINES, FL 33026

1000 N. HIATUS ROAD SUITE 106 PEMBROKE PINES, FL 33026

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

ROXANN PINERO

Name Florida stroot address (P.O. Box not acceptable) *1000 N. HIATUS ROAD SUITE 106* PEMBROKE PINES, FL 33026

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..

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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:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

RAFAEL CARRERO

MGR

**ROXANN PINERO** 

(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 facto stated herein are true.)

Typed or printed name of signee

Royana Pinere

Typed or printed name of signee Roxum Pinero DAPR 25 AM 10: ECRETARY OF STA

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