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SECRETARY OF STATE
TALLAHASSEE, FLORID

COVER LETTER

Division of Corp				
SUBJECT:	iena Cliar	ring Services	LLC.	
SUBJECT: Miena Quaning Services 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:				
RosaMaria C Vitoria (Name of Person)				
MLTMS, JNC. (Firm/Company)				
2506 Auburn Drive (Address)				
250	6 Ausurn	(Address)		
_				
	ocoa FL 32	1926-5707		
(City/State and Zip Code)				
For further information concerning this matter, please call:				
roi furdier information c	_			
Romanic Cultonic at (321) 632-1011 (Name of Person) (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
MINA TEANING STRUICES (Must end with the words "Limited Liability Company, "Limited	LIMITED LIABILITY COMPANY Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1051 CLEVELAND STR MELBOURNE FL 32935	MELBOURNE, FL 32935
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
ROSAMARIA C Name	Vitoria RASSEE
<u> 2506 AUBUR</u>	ess (P.O. Box NOT acceptable)
_	
COCO A City, State, an	FL 32926 d Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete perj	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and eyed agent as provided for in Chapter 608, F.S
Registered Agent's Signatur	MC (REQUIRED)
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(CONTINUED)
Page 1 of 2

The name and address of each Manage	er or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	MIRNA I JAIDEZ 1051 CLEVELAND Street Helbourne FL 32935
(Use attachment if necessary) RTICLE V: Effective date, if other than the date an effective date is listed, the date must be or 90 days after the date of filing.)	date of filing: <u> </u>
REQUIRED SIGNATURE:	FILED 07 JUL -5 PH SECRET ARY UT TALLAHASSEE,
(In accordance with section of this document constituent that the facts stated here	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)
Filing Fees:	es or brusses immiss or niBites

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

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)