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COVER LETTER

TO:

Registration Section

Division of Corporations	
_{SUBJECT:} Costa Ventures C	Group (CVG) L.L.C.
	me of Limited Liability Company)
The enclosed Articles of Organization and	d fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Anthony Madpak	
	(Name of Person)
Costa Ventures Grou	ıp (CVG)
	(Firm/Company)
1616 Hwy A1A	
	(Address)
Satellite Beach, FL 3	2937
	(City/State and Zip Code)
For finish on in formation and arrive attication	order where sells
For further information concerning this m	atter, please call:
Anthony Madpak	at (561 306-6605
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following:	amount:
\$125.00 Filing Fee \$130.00 Filing Certificate of	
Mailing Addre Registration Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction Registration Section rporations Division of Corporations Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	ny is:
Costa Ventures Group (CVG) (Must end with the words "Limite	L.L.C. d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1616 Hwy A1A Satellite Beach, FL 32937	1616 Hwy A1A Satellite Beach, FL 32937
0.0000000000000000000000000000000000000	Odding Bodon, 1 E 02301
1616 Hwy A1A	:
	reet address (P.O. Box NOT acceptable)
Satellite Beach,	FL 32837
• •	State, and Zip
madiniy company at the place designal	and to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as appacity. I further agree to comply with the provisions of all
	lete performance of my duties, and I am familiar with and
HAA	s registered agent as provided for in Chapter 608, F.S
Registered Agent's	Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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	Anthony Madpak
	1616 Hwy A1A
	Satellite Beach, FL 32937
MGRM	Efthymia Madpak
	1616 Hwy A1A
	Satellite Beach, FL 32937
MGRM	Chris madpak
WOTON	1616 Hwy A1A
•	Satellite Beach, FL 32937
<u>NA</u>	<u>NA</u>
·	NA
	an the date of filing: NA (OPTIONAL) nust be specific and cannot be more than five business days pr
CLE V: Effective date, if other tha	an the date of filing: NA (OPTIONAL)
CLE V: Effective date, if other that effective date is listed, the date mode days after the date of filing.) REQUIRED SIGNATURE:	an the date of filing: NA (OPTIONAL)
CLE V: Effective date, if other that effective date is listed, the date mode days after the date of filing.) REQUIRED SIGNATURE: Signature of a in (In accordance won of this document)	an the date of filing: NA (OPTIONAL) The specific and cannot be more than five business days property of a member. With section 408.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.
CLE V: Effective date, if other that effective date is listed, the date mode days after the date of filing.) REQUIRED SIGNATURE: Signature of a in (In accordance won of this document)	nust be specific and cannot be more than five business days prember or an althorized representative of a member. with section 608.408(3), Florida Statutes, the execution to constitutes an affirmation under the penalties of perjury
CLE V: Effective date, if other that effective date is listed, the date mode days after the date of filing.) REQUIRED SIGNATURE: Signature of a in (In accordance won of this document)	nember or an althorized representative of a member. with section 698.408(3), Florida Statutes, the execution to constitutes an affirmation under the penalties of perjury stated herein are true.) Typed or printed name of signee
CLE V: Effective date, if other that effective date is listed, the date mode days after the date of filing.) REOUIRED SIGNATURE: Signature of a mode of this document that the facts signature of a mode days after the date of this document that the facts signature of a mode days after the date of this document that the facts signature of a mode days after the date of filing.)	an the date of filing: NA (OPTIONAL) nust be specific and cannot be more than five business days presentative of a member. with section 408.408(3), Florida Statutes, the execution to constitutes an affirmation under the penalties of perjury stated herein are true.) Typed or printed name of signee
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