

L07000113654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 28 2008

EXAMINER

DB

12/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOVIES PLUS LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

CARLOS M. FARAH, CPA

(Name of Person)

APPELROUTH FARAH & CO., P.A.

(Firm/Company)

999 PONCE DE LEON BLVD., SUITE 625

(Address)

CORAL GABLES, FLORIDA 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

VICKY YANES

(Name of Person)

at (305) 444-0999, EXT 253

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2007

CARLOS M. FARAH, CPA
APPELROUTH FARAH & CO., P.A.
999 PONCE DE LEON BLVD., SUITE 625
CORAL GABLES, FL 33134

SUBJECT: MOVIES PLUS LLC
Ref. Number: L07000113654

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for MOVIES PLUS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 707A00071217

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
MOVIES PLUS, LLC

SECOND: The articles of organization or the application to transact business

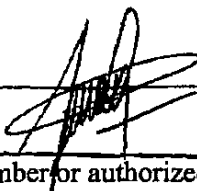
(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
ARTICLE II - PRINCIPLE AND MAILING ADDRESS - Should be changed to: 8877 Collins Avenue, Apt. 508,
Miami Beach, Florida 33154; ARTICLE III - NAME & ADDRESS OF REGISTERED AGENT- Should be
changed to: Roxana Rotundo, 8877 Collins Avenue, Apt. 508, Miami Beach, Florida 33154;
Article IV - Managers(2) or Managing Member - Mr. Miguel Rosenfeld's should be removed.

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: December 17 2007



Signature of a member or authorized representative of a member

Miguel J. Rosenfeld

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA

ROXANA ROTUNDO
8877 COLLINS AVENUE
SUITE 508
MIAMI BEACH, FLORIDA 33154
roxana@vip2000.tv

January 16, 2008

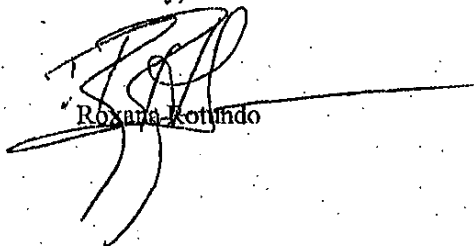
Ms. Deborah Bruce, Regulatory Specialist
Florida Department of Revenue
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Movies Plus LLC
L07000113654

To Whom It May Concern:

As a follow-up to your letter dated December 21, 2007, this document serves as written acceptance to serve as the registered agent for the above referenced company and hereby accept the duties and responsibilities of a registered agent.

Sincerely,


Roxana Rotundo

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TALLAHASSEE, FLORIDA

③

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MOVIE PLUS 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:

**2800 SW 3RD AVENUE
SUITE 801
MIAMI, FLORIDA 33129**

**2800 SW 3RD AVENUE
SUITE 801
MIAMI, FLORIDA 33129**

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

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

MICHAEL J. ROSENFELD

Name

500 PORCE-DE-LEON BLVD.

Florida street address (P.O. Box NOT acceptable)

MIAMI, FLORIDA 33134

City, State, and Zip

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.

X

Registered Agent's Signature

(CONTINUED)

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DIVISION OF CORPORATIONS
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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>	<u>Name and Address:</u>
"MGR" - Manager	
"MGRM" - Managing Member	
<u>MGRM</u>	<u>MIGUEL J. ROSENFELD</u> <u>2600 SW 3RD AVENUE, SUITE 801</u> <u>MIAMI, FLORIDA 33129</u>
<u>MGR</u>	<u>ROXANA ROTUNDO</u> <u>8877 COLLINS AVENUE, APT. 508</u> <u>BOCA RATON, FLORIDA 33134</u>

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

X 
Signature of a member or an authorized representative of a member.
(In accordance with section 606.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)
MIGUEL J. ROSENFELD
Typed or printed name of signer

Filing Fee:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 38.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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DIVISION OF CORPORATION
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