

LUB000002490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

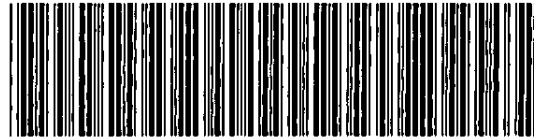
(Business Entity Name)

(Document Number)

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B. KOHR

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EXAMINER

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CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MR. BUSINESS CARD L.L.C
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:06 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☒ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name



AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

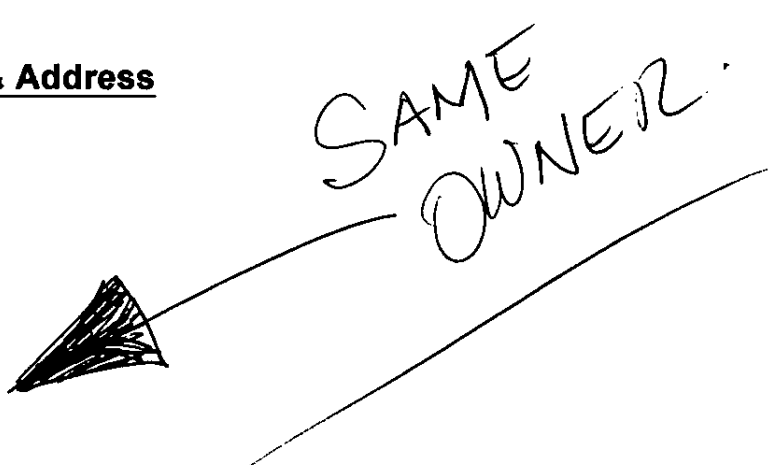
REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS					
Home	Contact Us	E-Filing Services	Document Searches	Forms	Help
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No Events	No Name History			<input type="text" value="Entity Name"/>	
Detail by Entity Name					
Florida Profit Corporation					
MR. BUSINESS CARD, INC.					
Filing Information					
Document Number P07000088673					
FEI Number NONE					
Date Filed 08/06/2007					
State FL					
Status ACTIVE					
Principal Address					
10431 S.W. 51 STREET MIAMI FL 33165					
Mailing Address					
10431 S.W. 51 STREET MIAMI FL 33165					
Registered Agent Name & Address					
SAGARO, JOSE 10431 S.W. 51 STREET MIAMI FL 33165 US					
Officer/Director Detail					
Name & Address					
Title PD					
SAGARO, JOSE 10431 S.W. 51 STREET MIAMI FL 33165					
Annual Reports					
No Annual Reports Filed					
Document Images					
08/06/2007 -- Domestic Profit View image in PDF format					

SAME OWNER



Note: This is not official record. See documents if question or conflict.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Mr. BUSINESS CARD L.L.C
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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ARTICLE II - Address:

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

Principal Office Address:

2600 Douglas Rd.
Suite 700
Coral Gables, FL 33134

Mailing Address:

10431 SW 51 st
Miami FL 33165

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

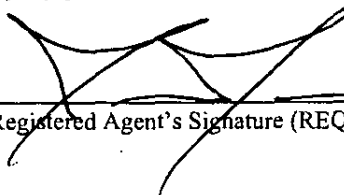
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JOSE E. SABARO
Name

10431 SW 51 Street
Florida street address (P.O. Box **NOT** acceptable)
Miami FL 33165
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, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

MGRM

Name and Address:

JOSE SAGARO
10431 SW 51 ST
MIAMI FL 33165

JUAN SAGARO
2600 DOUGLAS RD
SUITE 700
CORAL GABLES FL 33134

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

JOSE SAGARO
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)