

Division of Corporations

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2nd Request

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850) 617-6383

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Account Name : EXECUTIVE CORPORATE FILING, INC.
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

MORAGA ROOFING LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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T. HAMPTON

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MORAGA ROOFING LLC

(Must end with the words "Limited 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:

119 NW 19 AVENUE
MIAMI, FL 33125

119 W 19 AVENUE
MIAMI, FL 33125

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:

HORACIO ANTONIO MORAGA

Name

119 NW 19 AVENUE

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

MIAMI FL 33125

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..

 2-19-08

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGR _____

HORACIO ANTONIO MORAGA
119 NW 19 AVENUE, MIAMI FL 33125

MGR _____

JOSE ALEJANDRO CASTRO MORAGA
2635 NW 9TH STREET, MIAMI FL 33125

(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:

 2-19-08
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.)

Horacio Antonio Moraga
Typed or printed name of signor

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)

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