

LU8000020636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

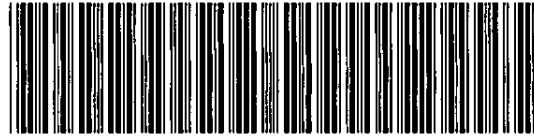
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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02/27/08--01017--013 **155.00

RECEIVED
08 FEB 27 AM 11:00
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

FEB 27 2008

EXAMINER

FILED
08 FEB 27 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LAZARUS
CORPORATE FILING SERVICE
3320 SW 87TH AVENUE
MIAMI, FL 33165
305-552-5973

Office Use Only

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. PANY'S LLC.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time

2.00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

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

AMENDMENTS

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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

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

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I –Name:

The name of the Limited Liability Company is:

Pany's LLC.

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

ARTICLE II – Address:

Principal Office Address:

**11501 NW 77 ST.
Miami, Fl 33178**

Mailing Address:

**11501 NW 77 ST.
Miami, Fl 33178**

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 with an active Florida registration.)

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

Teresa D. Soto de Moveja

Name


13673 SW 26 ST

Florida street address (P.O Box NOT acceptable)

Miami, Florida, 33175

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 Signature (REQUIRED)

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TALLAHASSEE, FLORIDA

ARTICLE IV- manager (s) or Managing Members(s):

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

Title:

"MGR"= Manager

"MGRM"= Managing Member

Name and Address:

Teresa D. Soto de Moya

MGRM

13673 SW 26 ST

Miami, Florida, 33175

Vilma Maldonado

MGR

11501 NW 77 ST.

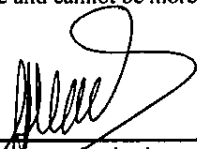
Miami, FL 33178

(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 90 days after the date of filing.)

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
I (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.)

Teresa D. Soto de Moya
Typed or printed name of signee

Filing Fees:

\$ 125.00 Filing for Articles of Organization and Designation
of registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)