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J. BRYAN

FEB 2 8 2008

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
, SUBJ	CT. Florida Mango Tree LLC.		
,	(Name of Limited Liability Company)		
The er	losed Articles of Organization and fee(s) are submitted for filing.		
Please	eturn all correspondence concerning this matter to the following:		
	Jeffrey Yagoda		
	(Name of Person)		
	Florida Mango Tree LLC.		
	(Firm/Company)		
	8635 SW 96 St.		
	(Address)	0	Œ
	Miami, Fl. 33156	1338	STATE OF THE
	(City/State and Zip Code)	<u>.</u>	
For fu	her information concerning this matter, please call:	08 FEB 27 PM 2: 82	
Jeff	ey Yagoda at (305) 785-8661	7.7 20 20	,
	(Name of Person) (Area Code & Daytime Telephone Number)		
Enclo	ed is a check for the following amount:		
\$125	00 Filing Fee \$130.00 Filing Fee & Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	us &	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Florida Mango Tree "LLC." (Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	of the principal office of the Limited Liab	ility Company is
Principal Office Address:	Mailing Address:	
8635 SW 96 St.	8635 SW 96 St.	
Miami, Fl. 33156	Miami, Fl. 33156	
business entity with an active Florida registration.) The name and the Florida street address Jeffrey Yagoda 8635 SW 96 S	Name	TEB 27 PM 2: 02
	street address (P.O. Box NOT acceptable)	
Miami, Fl. 3315	56	
	ty, State, and Zip	
liability company at the place design registered agent and agree to act in this statutes relating to the proper and com	t and to accept service of process for the ab ated in this certificate, I hereby accept the capacity. I further agree to comply with th aplete performance of my duties, and I am f yas registered agent as provided for in Cha	appointment as he provisions of (familiar with and

(CONTINUED) Page 1 of 2

gent'a Signature (REQUIRED)

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

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

"MGR" Jeffrey E. Yagoda 8635 SW 96 St. Miami, Fl. 33156 "MGR" Gregg Bibliowicz 5604 SW 114 Ave. Cooper City, Fl. 33330	<u>Title:</u> "MGR" = Manager "MGRM" = Managing	Name and Address: Member
Miami, Fl. 33156 "MGR" Gregg Bibliowicz 5604 SW 114 Ave. Cooper City, Fl. 33330	"MGR"	Jeffrey E. Yagoda
"MGR" Gregg Bibliowicz 5604 SW 114 Ave. Cooper City, Fl. 33330		8635 SW 96 St.
5604 SW 114 Ave. Cooper City, Fi. 33330		Miami, Fl. 33156
Cooper City, Fl. 33330	"MGR"	Gregg Bibliowicz
08 FEB 27 PM 23 82		5604 SW 114 Ave.
P 22		Cooper City, Fl. 33330
P 22		<u> </u>
P 22		<u> </u>
P 22		<u> </u>
		2
		-0 .
(I lea attachment if necessary)		3
(I so attachment if necessary)		
TCLE V: Effective date, if other than the date of filing: (OPTIONAL a effective date is listed, the date must be specific and cannot be more than five business days 90 days after the date of filing.)	effective date is listed, th	Fother than the date of filing: (OPTIONAL e date must be specific and cannot be more than five business days
	Signa	tyre of member or an authorized representative of a member.
Signature of a member or an authorized representative of a member.	of this	document constitutes an affirmation under the penalties of perjury
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.)	lef	frey E. Vagoda
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury	UGI	IICY E. FAGOGA

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)