

Division of Corporations Public Access System

### **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000132595 3)))



H080001325953ABC

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### miami business llc

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

Electronic Filing Menu

Corporate Filing Menu

Help

G. MCLEOD

MAY 21 2008

EXAMINER

5/19/2008 12:24 PM

EMPIRE CORP KIT

65/20/2008 11:43

# HO8000132595

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the L	imited Liabilit	y Company is:		
	MIAMI	BUSINESS	LLC	
(Must end with the word "I.J.C.")	k "Limited Liabilit	Company," the abbreviati	un "L.L. C.," or the designation	

ARTICLE II - Address:

ARTICLE I - Name:

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

rincipal Office Address:	Mailing Address:
7018 SW 87th AVENUE MIAMI PL 33173	7018 SW 87th AVENUE MIAMI FL 33173

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

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

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

RICARDO BOIGRO						
7018	SW	Name +	AVENUE			
Florida street	address	(P.O. Box	NOT acceptable	)		
MLAM	1/	FL	33/13	}		
	-1-		1 (			

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 um 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)

Page 1 of 2

H08000132595

08 MAY 20 AH 10: 06

## H08000132595

ARTICLE IV. Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MCR" = Manager Name and Address: "MGRM" = Managing Member MGR MBRM (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date is listed therein.) 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.) 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) H08000132595

PAGE 04/04