L08000073540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T. HAMPTON

JUL 31 2008

EXAMINER

608-7563

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: FORCEDEUCE INVESTMENT LLC.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROLANDO PAZ
(Name of Person)

(Firm/Company)

15201 SW 147 AVE.
(Address)

MIAMI, FLORIDA 33187
(City/State and Zip Code)

For further information concerning this matter, please call:

ROLANDO PAZ at (786) 525-1603
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ $125.00 Filing Fee ☐ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☑ $160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FLORIDA DEPARTMENT OF STATE
Division of Corporations

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08 JUL 31 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 12, 2008

ROLANDO PAZ
15201 SW 147 AVE
MIAMI, FL 33187

SUBJECT: FORECEDEUCE INVESTMENT LLC
Ref. Number: W08000007563

We have received your document for FORECEDEUCE INVESTMENT LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for $160.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 108A00009166

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

FORCEDEUCE INVESTMENT 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:**
15201 SW 147 AVE.	15201 SW 147 AVE.
MIAMI, FLORIDA 33187	MIAMI, FLORIDA 33187

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:

ROLANDO PAZ
Name

15201 SW 147 AVE.
Florida street address (P.O. Box **NOT** acceptable)

MIAMI, FLORIDA FL 33187
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..

Rolondo Paz
Registered Agent's Signature (REQUIRED)

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TALLAHASSEE, FLORIDA

(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	**Name and Address:**
MGRM	ROLANDO PAZ 15201 SW 147 AVE. MIAMI, FLORIDA 33187

(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:

Rolando Paz

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.)

ROLANDO PAZ

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)

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08 JUL 31 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA