

L08000107486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

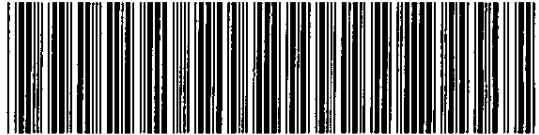
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700137978847

11/18/08--01005--004 **160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 NOV 18 AM 11:58

J. BRYAN
NOV 19 2008
EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: MGL GLOBAL COMMERCE 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:

GUILLERMO A. LEAL
(Name of Person)

MGL GLOBAL COMMERCE LLC
(Firm/Company)

3340 NE 190TH STREET SUITE 1207
(Address)

AVENTURA FL 33180
(City/State and Zip Code)

FILED STATE
SECRETARY OF CORPORATIONS
08 NOV 18 AM 11:58

For further information concerning this matter, please call:

GUILLERMO LEAL at (954) 806 0912
(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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MGL GLOBAL COMMERCE LLC

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 NOV 18 AM 11:58

ARTICLE II - Address:

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

Principal Office Address:

3340 NE 190TH STREET
SUITE 1207
AVENTURA, FL 33180

Mailing Address:

3340 NE 190TH STREET
SUITE 1207
AVENTURA, FL 33180

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:

GUILLERMO LEAL

Name

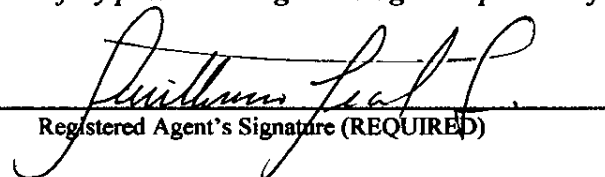
3340 NE 190TH STREET STE 1207

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

AVENTURA, FL FL 33180

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's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

GUILLERMO A. LEAL

3340 NE 110TH STREET STE 1207

AVENTURA FL 33180

MGRM

CLAUDIA M. PINZON

3340 NE 110TH STREET STE 1207

AVENTURA, FL 33180

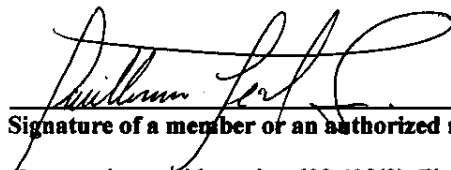
(Use attachment if necessary)

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
08 NOV 18 AM 11:58

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:



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.)

GUILLERMO LEAL

Typed or printed name of signer

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)