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DIVISION OF CORPORATIONS

J. BRYAN

JAN 28 2009

EXAMINER

COVER LETTER

TO:	Registration S Division of Co						
SUBJ	ECT: 8 Ente	rprise, LLC					
5020		(Name of Limi	ted Liability Com	pany)		_	
The er	nclosed Articles of	Organization and fee(s) are	submitted for fili	ng.			
Please	return all correspondent	ondence concerning this mat	tter to the following	ng:			
	Miguel Par	neke				·	
			(Name of Person)				드
	8 Enterpris	se, LLC				09 JAN 27	VISION
			(Firm/Company)			75	97
	1465 SW 8	8 Street #106				7 PH	CORPORATIONS
			(Address)				PATE AT
	Miami, FL	33135				57	SHO
		(Ci	ty/State and Zip Co	de)			
For fu	rther information o	concerning this matter, pleas	e call:				
Mig	uel Paneke		_ _{at (} 786	704-28		_	
	(Name	of Person)	(Area Co	rde & Daytime T	elephone Number)		
Enclo	sed is a check for	r the following amount:					
√ \$125	.00 Filing Fee 【	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified C (additional co		\$160.00 Filing Certificate of S Certified Copy (additional copy is	tatus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Conrier Addressition Section of Corporation Building xecutive Center ssee, FL 32301	ons Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	0 24
The name of the Limited Liability Company is:	9 Sic.
	£ 95
8 Enterprise, LLC	
(Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1465 SW 8 Street	1465 SW 8 Street
Miami, FL 33135	Miami, FL 33135
business entity with an active Florida registration.) The name and the Florida street address of the re Miguel Paneke	egistered agent are:
Name	
1465 SW 8 Street #1	06
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Miami, FL 33135	FL
City, State, ar	ad Zip
liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

Registereti Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV - Manager(s) or Manage The name and address of each Manage	Managing Member is as follows: Name and Address: Name and Address:	
Lite	, paneke 44106	
Title: Manager Member "MGR" = Managing Member "MGRM" = Managing Member	MIGOS SW 8 STIFES	
"NO	Maria Cristina Alarcon Maria Cristina Alarcon	
MGR	Maria Chia Street # 10	
Michigan	Maria Cristina Alaito 1465 SW 8 Street #106	
	1465 SW 8 33135 Miami, FL 33135	
MGRM		
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