L09000013497

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
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2009 FEB 10 AH 8: 03

SCORETARY OF STATE
TO AH ASSESS FI CORETA

C. LEWIS
2-11-09
EXAMINER

cover letter by			
TO: Registration Section Division of Corporations			
SUBJECT: M Squared 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:			
Michele R Berube-Buggica (Name of Person)			
M Squared UC			
3812 Misty Landing Drive			
Valvico, FL 33594 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Marlene M Herrera - Kot lah 814 813 957-4299 (Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)			
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations			

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2009

MICHELE R. BERUBE-BUGGICA M SQUARED, LLC 3812 MISTY LANDING DR. VALRICO, FL 33594

SUBJECT: M SQUARED LLC Ref. Number: W09000004679

We have received your document for M SQUARED LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L08000022869.

Please return the corrected original and one copy of your document, along with 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration Section

Letter Number: 909A00003440

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
M Squared of (Must end with the words "Limited Liability	Tampa Bay LLC y 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:
40417 Chancey Read Unit 102 Zepnychills, FL 33542	3812 Misty Landing Dr. Valrico, Pl 33594
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re MULLER BUYER Name 3012 MSH LOV Florida/street addr VALVICO, FL City, State, and	MANA DY I VE SEE, FLORE SEE, FLOR
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

CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):		FILED	
Title:	or Managing Member is as follows: Name and Address:	2009 FEB 10 AM 8: 04	
"MGR" = Manager "MGRM" = Managing Member		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Managen	Marlene M Herrera 3811 Misty Langin Valrico, Fr 33599	-Kotinsky g. Drive	
Manager	Michele R Berube- 3812 Misty Landi Valrico, Fil 33594	Buggica Agbrive	
· .	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the construction (If an effective date is listed, the date must be to or 90 days after the date of filing.)		(OPTIONAL) pusiness days prior	
REQUIRED SIGNATURE:			
Medilek	Buss		
Signature of a member	or an authorized representative of a member	-	
(In accordance with section of this document constitution	ion 608.408(3), Florida Statutes, the execution		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee