

Florida Department of State

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.

(((H09000054775 3)))



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

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019 Phone : (305)552-5973

: (305)220-1440 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MANNY SOURCE INVESTMENT LLC

1372 Fr.

1: 1

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

Electronic Filing Menu

Corporate Filing Menu

Help

3/9/2009 2:27 PM

H09000054775

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Manny Source inves	stment LLC.	
(Must end with the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
13932 SW 140 St 121ami FL 33177	Same-	
. .	egistered agent are: OMING UE Iress (P.O. Box NOT acceptable) PL 33177	

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

H09000054775

FAX NO. :3052201440

FROM :LAZARUS

H09000054775

<u>Title:</u> "MGR" = Manag "MGRM" = Mar	ger naging Member	Name and Address:
MGRM		Manuel Dominguez
		13932 sw 160 st Mami F(33177

(Use attachment	if necessary)	
	date, if other than the	e date of filing:
LEV: Effective	date, if other than the	e date of filing: (OPTIONAL) se specific and cannot be more than five business days pri
LEV: Effective	date, if other than the sted, the date must b ate of filing.)	be specific and cannot be more than five business days pri
LE V: Effective ffective date is list days after the d	date, if other than the sted, the date must be ate of filing.) GNATURE:	pe specific and cannot be more than five business days pri

Filing Fees:

\$125.00 Filing Pee for Articles of Organization and Designation of Rogistered Agent

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

Page 2 of 2