L04000043421

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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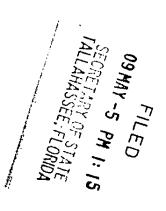
05/05/09--01028--017 **155.00



B. KOHR

MAY - 5 2009

EXAMINER



LAZARUS

CR2E031(7/97)

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

PLEASE TRY

TO FILE THIS

Company Between 10:30 AND 11:00 AM

Examiner's Initials

TUESDAY 5-5-09

	Office Use Only	·
CORPORATION NAME(S) & DOCU	JMENT NUMBER(S), (if known):	
1. VOICE'N MONE	V, LLC	
(Corporation Name)	(Document #)	-
2.	P.	SE T
(Corporation Name) 3.	(Document #)	LED 1:15
(Corporation Name)	(Document #)	<u> </u>
4.		ORIDA ORIDA
(Corporation Name)	(Document #)	
Walk in Pick up time	2.00 Certified Cop	y
☐ Mail out ☐ Will wait	Photocopy Certificate of	Status
NEW FILINGS	<u>AMENDMENTS</u>	•
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	•
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark	
• .	Other	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		0:
The name of the Limited Liability Company is:	Į.	""是"
Voice'n Money, LL (Must end with the words "Limited Liability	C	- 1 to 1 to 1 to 1
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")	THE STATE OF THE S
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Li	iability Company is:
Principal Office Address:	Mailing Address:	· Vi
9215 SW 36 ST Miomi, FL 33/65	same	, <u>:</u> _
1 Mioni, FL 33/65	-	
	red Agent. You must designate an indiv	ridual or another
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)	
Micensi City, State, ar	FL 35/65 nd Zip	
Having been named as registered agent and to a 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 accept the obligations of my position as registered.	is certificate, I hereby accept to I further agree to comply with formance of my duties, and I a	he appointment as h the provisions of all m familiar with and

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

<u>Fitle:</u> 'MGR" = Manager 'MGRM" = Managing Mo	
MGR.	LUZ MARINA SERRANO 9215 SW 365F Miami, FL 33165
MGR	Jose Adrian Custrilla 9215 SW 36 St Miami FL 33165
MGR	Jamid Arboleda 9215 SW 365t Miami FL 33/65
	·
(Use attachment if necess	ther than the date of filing: $5-5-09$. (OPTION.
LE V: Effective date, if of	data must be enceific and council be more than five business do
iecuve date is fisieu, die i	ciare inter de specific and camor de more chan use diamess ca
days after the date of fili	ing.)
days after the date of fili	RE:
days after the date of fili	ing.)

ARTICLE IV- Manager(s) or Managing Member(s):

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)

Typed or printed name of signee