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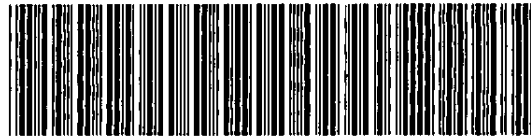
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T. HAMPTON

SEP 15 2009

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GOMEZ & SHAVIN, 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:

**Susan Shavin**

Name of Person

**Gomez & Shavin, LLC**

Firm/Company

**767 N.E. 195th Street**

Address

**Miami, Florida 33179**

City/State and Zip Code

**susan@zbsl.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Susan Shavin**

Name of Person

at (

**305**)

**484-4333**

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 GOMEZ & SHAVIN, L.L.C.

ARTICLE II - Address: 767 N.E. 195 Street, Miami, FL 33179

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

Principal Office address:

767 N.E. 195<sup>th</sup> STREET  
Miami, FL 33179

Mailing address:

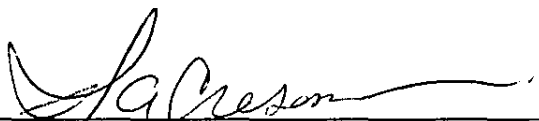
767 N.E. 195<sup>th</sup> STREET  
Miami, FL 33179

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's signature:

The name and the Florida street address of the registered agent are:

Richard A. Crisonino  
2534 S.W. 6<sup>th</sup> Street  
Miami, FL 33134

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.

  
Richard A. Crisonino, Registered Agent

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

The name and address of the Managing Members are as follows:

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Title:

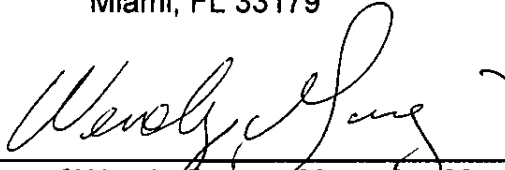
Managing member

Name and address:

Wendy Gomez  
3315 N.W. 202 Terrace  
Miami, FL 33056

Managing member

Susan Shavin  
767 N.E. 195<sup>th</sup> Street  
Miami, FL 33179



Signature of Wendy Gomez, Managing Member



Signature of Susan Shavin, Managing 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 states herein are true.)

Wendy Gomez, signee  
Susan Shavin, signee

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