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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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- Mizell Campbell Care
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CORRECT Effective Date 2 (10-6-09) DATE 10-13-09
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M. THOMAS

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**EXAMINER** 

MIZELL CAMPBELL JR., ESQ.

3389 Sheridan Street, # 497 Hollywood, FL 33021 352-514-0381 866-778-5827 (Fax) mizellesg@hotmail.com

October 5, 2009

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Dear Department of State,

The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

Mizell Campbell Jr., Esq. 3389 Sheridan Street, # 497 Hollywood, FL 33021

For further information concerning this matter, please call: Mizell Campbell Jr., Esq. at 352 381.

Enclosed is a check for \$125.00.

Sincerely,

Mizell Campell Jr., Esq.

ORIOA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: MAHOGANY ISLANDS VENTURE, LLC

ARTICLE II - Address:

Principal Office Address:

749 Penfield Street Long Boat Key, FL 34228

Mailing Address:

749 Penfield Street Long Boat Key, FL 34228

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

Robert J. Fritz, II 749 Penfield Street Long Boat Key, FL 34228

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: \_\_

## ARTICLE IV- Management:

The management of the company is reserved to the members of the company, in proportion to their contributions to the capital of the limited liability company. The power to adopt, after, amend or repeal the regulations of this limited liability company shall be vested in the members of the company.

The name and address of each Manager or Managing Member is as follows:

Title: Name and Address:

Robert J. Fritz, II - Manager 749 Penfield Street Long Boat Key, FL 34228

Petr Dzurec - Managing Member 5226 Lake Village Drive, Apt. #68 Sarasota, FL 34235

**ARTICLE V: Purpose** 

The purpose for which the company is formed is to engage in any lawful acts or activities for which limited liability out under the laws of the State of Florida.

ARTICLE VI: Effective date:

October 6,2009 mat

REQUIRED SIGNATURE:

an authorized representative of a member. Signature of a m

(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 stated herein are true.)

Robert J. Fritz. II

Typed or printed name of signee

Mahogany Islands Venture, LLC, Articles of Organization

Page 1

be formed