Division of Corporations Electronic Filing Cover Sheet

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· To:

Division of Corporations

Fax Number : (850)617-6383

From:

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Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)220-1440

Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please.

Email Address:

FLORIDA/FOREIGN LIMITED LIABILITY CO. MOZON DISCOUNT PROPERTIES, LLC

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Certificate of Status	0
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J. BRYAN

FEB **1 5** 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

H10000032548

ARTICLES OF ORGANIZATION FOR F	JLORIDA LIMITED LIABILITY C	OMPANY
ARTICLE I - Name: The name of the Limited Liability Company is	s:	
MOZON DISCOUNT. (Must end with the words "Limited Liab	Properties, LCC billity Company, "L.L.C.," or "LLC.")	-
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
5420 111 CAI	5430 W 514	
5430 W 5 AV HIALEAD EC 33012	HIACEAL EC 3301	2
		-~
5430 W 5A Florida street address (P.	ristered Agent. You must designate an individual or a	10 FEB 12 AM 8: 18 SECRETARY OF STATE SALLAHASSEE. FLORIDA
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capace statutes relating to the proper and complete paccept the obligations of my position as registered Agent's Sign	n this certificate, I hereby accept the appo city. I further agree to comply with the pr performance of my duties, and I am famil gistered agent as provided for in Chapter	ointment as vovisions of all liar with and

(CONTINUED)

H10000032548

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ARTICLE IV-	· Manager(s) or	· Managing I	Member(8)	
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The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Hayke (Honzón 5x30 w 5 AV Hioliah FC 33012
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	RY OF C
	OR IDE
(Use attachment if necessary)	 →
ICLEV: Effective date, if other than the	1. CCI
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n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document constitute that the facts stated here	
n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document constitute that the facts stated here	r or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury cin are true.)
n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document constitute that the facts stated bere-	e specific and cannot be more than five business days per or an authorized representative of a member. Stion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury