

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinon, Marios),
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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T. CLINE

MAR - 4 2010

EXAMINER

TO HAR -3 M & 55
2010 HAR -3 M & 55
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 15, 2010

CHRISTINA MIRANDA 2902 WOOLRIDGE DRIVE ORLANDO, FL 32837

SUBJECT: MIRANDA ENTERPRISES, LLC

Ref. Number: W10000007600

We have received your document for MIRANDA ENTERPRISES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet the light the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the ward Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P03000114499.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II R-3 AM 8: 55

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 210A00003734

COVER LETTER

TO:

Registration Section

Division of C	orporations		
SUBJECT: CMirat	nda Enterprises, LLC	;	
50502011		ted Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
Christina M	iranda		
		Name of Person	0.14 OFF
		Firm/Company	
2902 Woolr	idge Drive		
		Address	
Orlando, FL	. 32837		
		ty/State and Zip Code	2010 TAL
cmiranda@	CTI.rr.com E-mail address: (to be used)	for future annual report notification)	- 5G 3 T
For further information	concerning this matter, pleas		2010 MAR -3 AM SECRETARY OF TALLAHASSEE. F
Chris Miranda		_at (407) 325-4133	E OF S
Name	of Person	Area Code & Daytime Tele	phone Number RES
Enclosed is a check f	or the following amount:		ŕ
□\$125.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 Compa	ny is:
CMiranda Enterprises, LLC (Must end with the words "Limited	d Liability 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:
2902 Woolridge Drive	2902 Woolridge Drive
Orlando, FL 32837	Orlando, FL 32837
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Christina M Mirand	la E.F.C.
	Name ORIE 55
2902 Woolridge D	rive
Florida str	reet address (P.O. Box NOT acceptable)
Orlando	FL 32837
C	City, State, and Zip
liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and compl	nd to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as upacity. I further agree to comply with the provisions of all eteleperformance of my duties, and I am familiar with and s registered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REQUIRED

(CONTINUED)
Page of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing !	Name and Address: 1ember	
MGRM	Christina M Miranda 2902 Woolridge Drive Orlando, FL 32837	_ _ _
(Use attachment if neces FICLE V: Effective date, if a n effective date is listed, the 90 days after the date of fi	other than the date of filing: 4/1/2010 (F) date must be specific and cannot be more than five business	2000 L) TO See days prior
REQUIRED SIGNATI	RE:	M & 55
(In according to this of	rdance with section 608.408(3), Florida Statutes, the execution ocument constitutes an aftermation under the penalties of perjury facts stated herein are true.) MUS Typed or printed name of signee	
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)