## 110000061325

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PICK-UP WAIT MAIL
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06/07/10--01017--023 \*\*130.00



S. HAWKES
JUN 0 8 2010
EXAMINER

## **COVER LETTER**

	stration Section ion of Corporations		
	•		
SUBJECT:	Go Fernandez LLC	d Liability Company	
	Name of Emilie	d Liability Company	
The enclosed A	Articles of Organization and fee(s) are so	ubmitted for filing.	
Please return a	Il correspondence concerning this matte	er to the following:	
Miche	ele Fernandez		
	Ī	Name of Person	
Go Fe	ernandez LLC		
	<u></u>	Firm/Company	
11611	SW 123 Ave		
		Address	
Miami	Florida 33186		
<del></del>	City	/State and Zip Code	
michfe	ernandez1@aol.com	or future annual report notification)	
Dan Camban in C			1
ror lumer inte	ormation concerning this matter, please	can: ·	•
Michele Fer		at ( 305 ) 345-3282	<u>.</u>
	Name of Person	Area Code & Daytime Telephone	Number
Enclosed is a	check for the following amount:	· · · .	
□\$125.00 Fili	ng Fee 2\$130.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	0.00 Filing Fee, tificate of Status & tified Copy itional 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:		<u>. y</u>
The name of the Limited L	iability Company is:	Company, "L.L.C.," or "LLC.")
Go Fernandez LLC		
(Must end with	h the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:		من المراجعة
The mailing address and st	reet address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
11611 SW 123 Ave		11611 SW 123 Ave
Miami Fl 33186		Miami FI 33186
business entity with an active Florida s  The name and the Florida s  Jorge I		gistered agent are:
	Name	
11611	SW 123 Ave	
	Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Miami		FL 33186
	City, Stat	e, and Zip
liability company at the registered agent and agree statutes relating to the pr	place designated in the to act in this capacity. of and complete per	ecept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered Agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

	Name and Address:
"MGR" = Manager	<u> </u>
"MGRM" = Managing Member	
MGR	Michele Fernandez
	11611 SW 123 Ave Miami FI 33186
	100000000000000000000000000000000000000
<del></del>	
(1)	
(Use attachment if necessary)	
•	ne date of filing: 06/01/10 (OPTIO
CLE V: Effective date, if other than the	
CLE V: Effective date, if other than the effective date is listed, the date must	ne date of filing: 06/01/10 . (OPTIO be specific and cannot be more than five business
CLE V: Effective date, if other than the	
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CLE V: Effective date, if other than the effective date is listed, the date must 00 days after the date of filing.)  REQUIRED SIGNATURE  Signature of a mem	be specific and cannot be more than five business of the busin
CLE V: Effective date, if other than the effective date is listed, the date must 00 days after the date of filing.)  REQUIRED SIGNATURE  Signature of a mem  (In accordance with	be specific and cannot be more than five business of the busin
CLE V: Effective date, if other than the effective date is listed, the date must 00 days after the date of filing.)  REQUIRED SIGNATURE  Signature of a mem  (In accordance with	be specific and cannot be more than five business of ber or an authorized representative of a member.  section 608-408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury

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)