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(Address)				
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B. KOHR

JUL - 1 2010

EXAMINER

DIVISION OF CORPORATIONS

Charter Number Only

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Melnick, Lilienfeld + Assoc.

Requestor's Name

2670 NE 215th Street

Address

Minmi FL 33180

City State 21P Phone

(305) 937-1040

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CORPORATION(S) NAME

CAI	3A NOITE) enterpi	ISES, LLC
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() Profit			
() NonProfit	() Amen	dment	() Merger
() Foreign	() Dissal	ution	() Mark
() Limited Partnership	() Annual Report		(X) Other LLC
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() Certified Copy	() Photo	Copies	() Certificate Under Seal
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Name Availability			
Document			
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Updater			

CR2E031 (R8-85)

Verifier

W.P. Verifier

Empire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY				
ARTICLE I - Name: The name of the Limited Liability Company is:	The Control of the Co				
Cabanelle Enterprises, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")					
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
5372 W 7th Court Haleah, FL 33012	5372 W 7+n COVV+ Hialah, FL 33012.				
ADVICE E III. Decidend Access Decidend	Office & Desistant Association				

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Serg Cabanel

Name

5372 W 7+n Couvt

Florida street address (P.O. Box NOT acceptable)

Hialum FL 330/2

City, State, and Zip

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) _____. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a 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 stated herein are true.)

Cabanel
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)