

L160000070580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

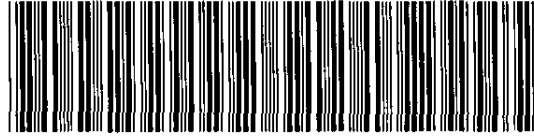
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600182137636

07/07/10--01001--009 **1207.50

GORA FLAL

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
10 JUL - 2 AM 8:15

B. KOHR

JUL - 7 2010

EXAMINER

Advanced Incorporating Service, Inc.

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@advancedincorporating.com
Website: www.advancedincorporating.com

RECEIVED
DIVISION OF CORPORATION
10 JUL -2 AM 8:15

NAME OF ENTITY

FOR OFFICE USE ONLY

PICK ONE:

☐ CERTIFIED COPY ☐ PHOTOCOPY

FILING:

☐ CORPORATION ☐ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP

☐ FICTITIOUS NAME ☐ SERVICEMARK/TRADEMARK ☐ AMENDMENT

☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN

☐ OTHER _____

RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY

Of _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE _____ TIME _____

Notes: _____

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUL -2 AM 8:15

**ARTICLES OF ORGANIZATION FOR
MANAGAD FAMILY MANAGEMENT, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is: **MANAGAD FAMILY MANAGEMENT, LLC**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: **1611 Brilliant Cut Way, Valrico, Florida 33594**

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Operating Agreement.**

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members. The names and addresses of the managing members are:

**Juan Managad
1611 Brilliant Cut Way
Valrico, FL 33594**

**Thelma Managad
1611 Brilliant Cut Way
Valrico, FL 33594**

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: Only with the consent of all the remaining Members.

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing Members, by: Juan Managad and Thelma Managad.

Dated this 24th day of May, 2010.



Juan Managad
Managing Member



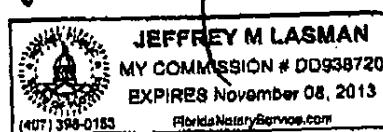
Thelma Managad
Managing Member

**STATE OF FLORIDA
COUNTY OF HILLSBOROUGH**

The foregoing instrument was acknowledged before me this 24th day of May, 2010, by **Juan Managad** and **Thelma Managad**, who have produced Florida Driver Licenses as identification.



Jeffrey M. Lasman, Notary Public



**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **MANAGAD FAMILY MANAGEMENT, LLC**
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire
LASMAN LAW FIRM, P.A.
6152 Delancey Station Street, Suite 205
Riverview, Florida 33578**

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.



Jeffrey M. Lasman

May 24, 2010
(Date)