## L10000071428

(F	Requestor's Name)	
. (/	Address)	
(/	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
])	Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

Office Use Only



000174785950

07/06/10--01069--019 \*\*698.75



C. LEWIS

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: MMM C		ed Liability Company	
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
Louis A. Sous	sa, Esquire		
		Name of Person	••••
Lisa & Sousa	Ltd.		
		Finn/Company	
5 Benefit Stre	et		
		Address	
Providence, F	Rhode Island 02904		
	Cit	y/State and Zip Code	
	E-mail address: (to be used	or future annual report notification)	
The fluther information	concerning this matter, pleas		
rot inthet intomation	conceining this matter, preas-	. Cati.	
Louis A. Sousa, Es		at ( 401 ) 274-0600	
Name	of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)  S160,00 Filing Fee & Certificate of Statu Certified Copy (additional copy is enclosed)	s &
	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	

FILED

2010 JUL -6 AM 18: 48

	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITŸ COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
MMM CORAL WAY, LLC	
(Must end with the words "Limited Liabiti	ty 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:
c/o Malcolm S. Butters 6820 Lyons Technology Circle, Suite 100	Same
Coconut Creek, Florida 33073	
The name and the Florida street address of the re  Malcolm S. Butters	egistered agent are:
Name	
.6820 Lyons Technology C	Circle, Suite 100
Florida street add	ress (P.O. Box NOT acceptable)
Coconut Creek	FI, 33073
	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	NUED)

FILED

2010 JUL -6 AM 18: 48

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<u>Title:</u> "MGR" = Manage:	Name and Address:
"MGRM" = Mana	
MGR	Malcolm S. Butters
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6820 Lyons Technology Circle, Suite 100
	Coconut Creek, Florida 33073
MGR	Marc Weinstein
	6820 Lyons Technology Circle, Suite 100
	Coconut Creek, Florida 33073
(Use attachment if	necossary)
(300 0000000000000000000000000000000000	
	te, if other than the date of filing: Immediately upon filing (OPTIONAL
effective date is liste 90 days after the dat	d, the date must be specific and cannot be more than five business days
30 days after the day	, or nung.,
DEALIDED SIC	NIA TREIDAY.
REQUIRED SIG	NATURE:
	P ml
	dough local
\$	lignature 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
•	hat the facts stated herein are true.)
	hat the facts stated herein are true.)  Louis A. Sousa, Attorney for the Company

Filing Fces:

\$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)