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D. BRUCE

JUL 19 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
, SUBJECT: MYNOY	LLC.			
		ed Liability Company	7	
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.	<u> </u>	
Please return all corresp	oondence concerning this mat	ter to the following:		
MYRIAM HEI	RNANDEZ			
		Name of Person		
MYNOY LLC				
_		Firm Company		
860 CORAL F	RIDGE DRIVE APT#103			
		Address	· mail and	
CORAL SPRI	NGS, FL 33071		100	
	· Cit	y State and Zip Code	\$ 5 F	- 1 1
MYRIAMNOY	@YAHOO.COM			_ [
	E-mail address: (to be used	for future annual report notification)	3	
For further information	concerning this matter, please	e call:	2	Ţ
MYRIAM HERNAN	DEZ	at (_754)422 5190	<u> </u>	
Name	of Person	Area Code & Daytime Tele	phone Number	
Enclosed is a check for	or the following amount:			,
☑\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	3	

P.O. Box 6327 Tallahassee, FL 32314 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 Company is:	
MYNOY LLC.	
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
860 CORAL RIDGE DRIVE APT#103	860 CORAL RIDGE DRIVE APT#103
CORAL SPRINGS, FL 33071	CORAL SPRINGS, FL 33071
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration.	tered Agent. You must designate an individual or another
MYRIAM HERNANDEZ Name	
860 CORAL RIDGE DRIV	The state of the s
Florida street add	lress (P.O. Box NOT acceptable)
CORAL SPRINGS,	FL 33071
City, Sta	ate, 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.

istered 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:

<u>Title:</u> "MGR" = Mana "MGRM" = Ma	nger unaging Member	Name and Address:			
Manager		MYRIAM HERNANDEZ		- -	
				- - -	
			· · · · ·	- - -	
**************************************			t	-	
(Use attachmen	t if necessary)			-	
ARTICLE V: Effective (If an effective date is li to or 90 days after the d	sted, the date must be s	nte of filing:	(OPTIC usiness)NAL days	.) prio r
REQUIRED SI	IGNATURE:		2005		
	Minard		A STATE	10 JU	
	(In accordance with section of this document constitute that the facts stated herein MYRIAM HERNANDEZ	,	HSY OF SIME	L 16 PH 2:57	

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)