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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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A. LUNT

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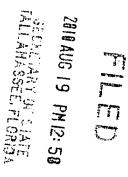
**EXAMINER** 

Office Use Only



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## **COVER LETTER**

SUBJECT: Algamis Soccer LLC  Name of Limited Liability Company	<del></del>
The enclosed Articles of Organization and fee(s) are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Richard M. Mogerman, Esq.	
Name of Person	
Richard M. Mogerman, P.A.	
Firm/Company	
8211 West Broward Boulevard, Suite 200	2018
Address	LAHASSH LAHASSH
Plantation, Florida 33324	L11
City/State and Zip Code	PH 12:
markmog@bellsouth.net	
E-mail address: (to be used for future annual report notification)	<u> </u>
For further information concerning this matter, please call:	<u>,,</u>
Richard M. Mogermanat ( 954)475-7171	
Name of Person Area Code & Daytime Telephone N	lumber

**Mailing Address** 

□\$125.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

**□**\$130.00 Filing Fee & Certificate of Status

■\$155.00 Filing Fee &

(additional copy is enclosed)

Certified Copy

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

□ \$160.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Co	mpany is:
Algamis Soccer LLC	
(Must end with the words "L	cimited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addres	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
304 Indian Trace	304 Indian Trace
#297	#297
Weston, Florida 33326	Weston, Florida 33326
The name and the Florida street address Richard M. Moge	ess of the registered agent are:
8211 West Brow	vard Boulevard, Suite 200
	da street address (P.O. Box <u>NOT</u> acceptable)
Plantation	FL 33324
	City, State, and Zip
liability company at the place design registered agent and agree to act in the statutes relating to the proper and co	ent and to accept service of process for the above stated limited gnated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of all omplete performance of my duties, and I am familiar with and ion 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:

<u>Title:</u> "MGR" = Mana "MGRM" = Ma	nger nnaging Member	Name and Address:		
MGRM	•	Narciso Algamis		
<del></del>	<del></del>	6060 Indian Creek Drive, #1001		
		North Miami Beach, Florida 33140	— <u>~</u> ,	
		<b>&gt;</b> 0.7	2010 MUG	
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	e date, if other than the da isted, the date must be s	nte of filing: (OPT pecific and cannot be more than five busines		
<u>REQUIRED</u> S	MAMA	or an authorized representative of a member.		ı
	(In accordance with section of this document constitute that the facts stated herein	on 608.408(3) Florida Statutes, the execution tes an affirmation under the penalties of perjury a are true.)		
	Richard M. Mogerman Typed	d or printed name of signee		
Filing Fee	<u>28:</u>			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)