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SECRETARY OF STATE TALLAHASSEELFLORIDA

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### **COVER LETTER**

Registration Section
Division of Corporations

TO:

9	SUBJECT:	МЕМТТО	CA VENTURES LLO	7	·
		112211 2 4	——————————————————————————————————————	ted Liability Company	··········
7	The enclosed A	Articles of	Organization and fee(s) are	submitted for filing.	
. F	Please return a	ll correspo	ndence concerning this ma	tter to the following:	
	DIMI	TRIOS	MENTIS		7 26
				Name of Person	
	MENT	CICA VI	ENTURES LLC		AHE ON .
				Firm/Company	AY SSEE
	1000	105tl	n Avenue		To F
				Address	
	<u>Plan</u>	tation		322	<b>&gt;</b>
			Ci	ty/State and Zip Code	
	jimm	yment	s@aol.com	for future annual report notification)	·
_			•	• ,	
ŀ	For further inf	ormation co	oncerning this matter, pleas	e call:	
_	DIMITRI			at (954) 605-710	
		Name of	Person	Area Code & Daytime Telep	shone Number
E	Enclosed is a	check for	the following amount:		
<u></u> \$1	125.00 Filing	Fee X	\$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 P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AK	IICL	L I -	IN a	me:
The	name	of th	ne L	imi

ted Liability Company is:

MENTICA VENTURES 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 principal office of the Limited Liability Company is:

#### **Principal Office Address:**

#### **Mailing Address:**

1000 105th Avenue Plantation, Florida 33322 1000 105th Avenue Plantation, Florida 33322

#### 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:

DIMITRIOS MENTIS

Name

1000 105th Avenue

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

**Plantation** 

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 Me

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

MGRM	Dimitrios Mentis 1000 105th Avenue
	Plantation, Florida 33322
	ALL AND
<del></del>	- SAR -
Use attachment if necessary)	RIOA RIOA

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

DIMITRIOS MENTIS

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)