L10000116233

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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decument Number)
(Document Number)
•
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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W10000050249
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Office Use Only



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FILED

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D. BRUCE

NOV 8 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 26, 2010

1 . 3. 4 5

MARIE JIMENEZ 1021 NW 23RD AVE MIAMI, FL 33125

SUBJECT: M &M LLC

Ref. Number: W10000050249

We have received your document for M &M LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 310A00025248

COVER LETTER

TO: Registration Division of C		
SUBJECT:	m+m	
	Name of Limited Liability Company	
The enclosed Articles	of Organization and fee(s) are submitted for filing.	
Please return all corres	spondence concerning this matter to the following:	
**************************************	marie Dimenes	
	Name of Person	
	Firm/Company	
	- 1021 NW 23 ave	
	Address	
	miame + la 33/25	
	City/State and Zip Code	.Com
For further information	n concerning this matter, please call:	
movie Napre	Area Code & Daytime Telephone Number	
Enclosed is a check f	for the following amount:	.
125.00 Filing Fee	Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) 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 Tallahassee, FL 32314 Control of Corporations Clifton Building Tallahassee, FL 32314	U

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•	-
The name of the Limited Liability Company is:)	
Mouries Service (Must end with the words "Limited Liability		
ARTICLE II - Address: The mailing address and street address of the printing address and street address address and street address	ncipal office of the Limited Liability Company is	s:
Principal Office Address:	Mailing Address:	
1021 NW 23 ave mami 7/a 33135	Same	
muami 7	ered Agent. You must designate an individual or another	FILED
Having been named as registered agent and to a	ccent service of process for the above stated limite	d

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

The name and address of each Manager or Managing Member is as follows: Name and Address: 'MGR' Manager Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

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