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EXAMINER

LAZARUS

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## H10000259651

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

BERKA

(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:

Mailing Address:

ANE

Princip	al Utb	ce Addr	<u>ess:</u>		
-701	BRI	CKEL	⊂ ¥	€Y	BLVD
#	230	2			
Mil	<u>~~1</u>	FL	-331	31	

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatury

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

LIONEL BERLONGA Name 101 BRICKELL HEX INVD #2302 Florida street address (P.O. Box NOT acceptable) MIDMI FL 33131 City, State, 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.

**Registered** Agent ignature (REQUIRED)

(CONTINUED)

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#### ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:

#### Name and Address:

"MGR" = Manager "MGRM" = Managing Member

MGF

MER

<u></u>	LIONEL BERLANGA 2525 SW. 3rd. Ave # 902 MIAMI, FL 33129
	CLOUDIO KAPUSTA TOI BRICKELL KEY BLVD #2302 MIAMI EL 33131
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(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.)

**REOUIRED 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.)

LONEL BERLANGA

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)

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