

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
MATICO GROUP LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

SECOND REQUEST

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Corporate Filing Menu

Help B. BOSTICK

FEB 16 2011

EXAMINER

2/14/2011 9:21 AM

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

MATICO GROUP 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:**12050 NE 163 STREET  
NORTH MIAMI BEACH  
FLORIDA 33162SAME**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:

MIGUEL MATO

Name

2050 NE 163 STREETFlorida street address (P.O. Box NOT acceptable)NORTH MIAMI BEACH FL 33162

City, State, and Zip

FILED  
11 FEB 16 PM 3:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H11000038770

H11000038770

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

MGRM**Name and Address:**

MIGUEL MATO  
2050 NE 163 STREET  
NORTH MIAMI BEACH  
FL 33162

(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. 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.)

Miguel Mato

Typed or printed name of signer

**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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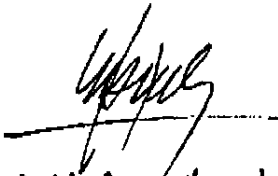
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February 11, 2011

To whom it may concern:

Please be advised that the owners of the company MATICO Group  
LLC with the document number LO900010581P are the same as those  
who are opening this new company with the same name. Thank you.

Sincerely,

x   
MIGUEL MATO

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