

L110000032818

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

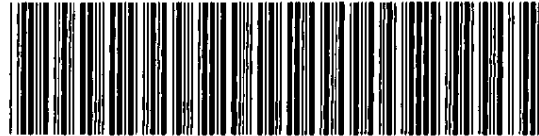
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EFFECTIVE DATE 3/4/2011

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MAR 18 2011

EXAMINER

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DIVISION OF CORPORATIONS

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# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

EFFECTIVE DATE 3/1/2014  
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
MAR 17 PM 3:15

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MIA JOY CANDLES, LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in    ☒ Pick up time 2.00    ☒ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

### NEW FILINGS

- ☐ Profit  
☐ Not for Profit  
☒ Limited Liability  
☐ Domestication  
☐ Other

### OTHER FILINGS

- ☐ Annual Report  
☐ Fictitious Name

### AMENDMENTS

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

### REGISTRATION/QUALIFICATION

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I – Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE 3/11/2011

Mia Joy Candles, 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:

8820 SW 132 Place, Suite D209  
Miami, FL 33186

#### Mailing Address:

8820 SW 32 Place, Suite D209  
Miami FL 33186

### 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:

Leslie Quiles  
Name

8820 SW 132 Place, Suite D209  
Florida Street address (P.O. Box NOT acceptable)

MIAMI FL 33186  
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 the 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..

x Leslie Quiles  
Registered Agent's Signature (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:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

**MGRM**

Leslie Quiles  
8820 SW 132 Place, #D209  
MIAMI FL 33186

**MGRM**

Lina L Cruz  
3489 Fort Independence Street, Apt LA  
Bronx, NY 10463

**MGRM**

Randy J Cruz  
3489 Fort Independence Street, Apt LA  
Bronx, NY 10463

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Friday, March 11, 2011. (OPTIONAL)

(If an effective dates is listed, the date must be specific and cannot be more that five business day prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

x Leslie Quiles  
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.)

Leslie Quiles

Typed of printed name of signee

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this Friday, March 11, 2011, Leslie Quiles the Member, who is personally known to me and who did take an oath.

Gabriel Rodriguez  
Gabriel Rodriguez, Notary Public  
State of Florida at Large

