

L11000038836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

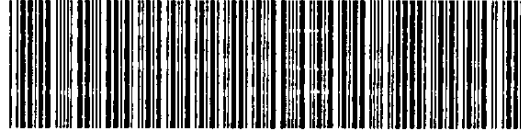
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/28/11--01036--005 **125.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR 31 PM 4: 26

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MARGARITA GROWTH LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DIANE NOBILE, ESQ.
Name of Person
NOBILE LAW FIRM, P.A.
Firm/Company
777 BRICKELL AVENUE, SUITE 1114
Address
MIAMI, FLORIDA 33131
City/State and Zip Code
diane@dnobilelaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DIANE NOBILE, ESQ. at (**305**) **577-0000**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$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 Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 29, 2011

DIANE NOBLE, ESQ.
NOBILE LAW FIRM, P.A.
777 BRICKELL AVENUE, SUITE 1114
MIAMI, FL 3313

SUBJECT: MARGARITA GROWTH LLC
Ref. Number: W11000017683

We have received your document for MARGARITA GROWTH 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 registered agent must sign accepting the designation.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 311A00007562

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MARGARITA GROWTH 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:

230 HAMPTON LANE
KEY BISCAYNE, FLORIDA 33149

Mailing Address:

230 HAMPTON LANE
KEY BISCAYNE, FLORIDA 33149

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:

DIANE NOBILE, ESQ.

Name

777 BRICKELL AVENUE, SUITE 1114

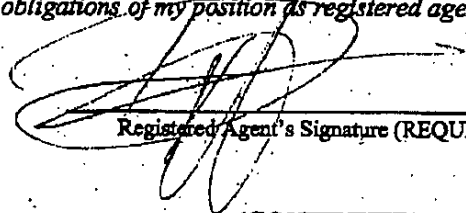
Florida street address (P.O. Box **NOT** acceptable)

MIAMI FL 33131

City, State, and Zip

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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)

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:

MGR

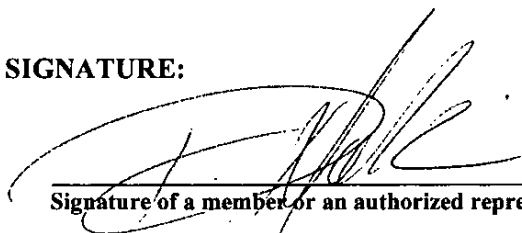
JOSEPH SAADE
230 HAMPTON LANE
KEY BISCAYNE, FLORIDA 33149

(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.)

DIANE NOBILE

Typed or printed name of signee

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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)