

LI 0000 69759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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L. CLINE

JUN 15 2011

EXAMINED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JUN 14 AM 11:17

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40 Exchange Place #1301
New York, NY 10005

6/10/2011

Re: Articles of Organization] and Request for Certified Copy and Apostille
For: MADE IN USA GROUP LLC

Dear Sir or Madam,

1) Enclosed please find Articles of Organizationfor:

MADE IN USA GROUP LLC

The appropriate fee of \$155.00 (Filing fee & Certified copy) is enclosed.

2) Please attach an Apostille to the above Certified Copy of the Articles of Organization to be used in
Slovakia after Articles of Organization are filed.

The appropriate fee of \$10.00 is enclosed.

Kindly return filed paperwork and Apostille to:

MyUSACorporation.com
c/o Julia Greenberg-Aguilar
40 Exchange Place, Suite 1301
New York, NY 10005

Thank you for your cooperation.

Sincerely,

Julia Greenberg-Aguilar

Senior Manager

MyUSACorporation.com

+1 (877) 330-2677

+1(877) 330-1035

julia@myusacorporation.com

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: MADE IN USA GROUP 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:

Julia Greenberg-Aguilar

Name of Person

MyUSAcorporation.com

Firm/Company

40 Exchange Place, Suite 1301

Address

New York, NY 10005

City/State and Zip Code

cesarguercio@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julia Greenberg-Aguilar

Name of Person

at (877) 330-2677

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)

+ \$10.00 Apostille
Total: \$165.00 (included)

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JUN 14 AM 17

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MADE IN USA 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:

1100 6TH AVENUE SOUTH SUITE #10, NAPLES, FL 34102

Mailing Address:

1100 6TH AVENUE SOUTH SUITE #10, NAPLES, FL 34102

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:

RAMIA MACDONALD

Name

1100 6TH AVENUE SOUTH SUITE #10

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

NAPLES

FL 34102

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..

DocuSigned by:

Ramia Macdonald

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

Miriam Leskanicova

Zahradna 5

Slovakia, Kosice, Visnov

MGRM

Peter Spisak

Denesova 63

Slovakia, Kosice, Kosice

MGRM

Tomas Retkovsky

Obrody 17

Slovakia, Kosice, Kosice

(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:

-DocuSigned by:

Miriám Leskanicová

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.)

Miriam Leskanicova

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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