# L11000008670H

(Requestor's Name)			
(Address)			
(Address)			
. (City/Sta	ite/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

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07/27/11--01007--020 \*\*125.00

EFFECTIVE DATE 07-20-11

TILED AHII: 18
11 JUL 27 AHII: 18
SILVAHASSEE FLORID

B. BOSTICK

JUL 28 2011

EXAMINER

# **COVER LETTER**

TO: Registration Division of C	Corporations		
SUBJECT:	Mixus, LLC		
3000ECT	Mixus, ZZC Name of Limited I	Liability Company	
	of Organization and fee(s) are sub		
Please return all corre	spondence concerning this matter t	o the following:	
Pansel	I Elacher		
Papira	Flasher	me of Person	
Mixu			
	Fil	rm/Company	
601	NE 36th 51. #/606,	Alami Ft	
		Address	
Mrs.	City/St City/St City/St City/St City/St City/St City/St City/St City/St		11 J
,	City/St	ate and Zip Code	
danry	flother eyahoo.	. com	SS 27
<b>,</b>	E-mail address: (to be used for f	uture annual report notification)	
	n concerning this matter, please ca		E FLOR
Daniel Fr	e of Person	305 877-0	~~~
Nam	e of Person	Area Code & Daytime Telep	hone 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 Ci Tallahassee, FL 32301	rcle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Mixvs, 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:
601 NE 36 12 St. #1606	Same
Minni, P.L 33137	

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: Name

601 NE 36 to St. 4/606

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

Mams

FL 33/17

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's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Paniel Flesher 601, NE 36 = St. #/606	
MGR	MIChael A. Vélez 1900 North BAYSHORE Drive #3706 Miami FL 33132	
	SSEE TO	
(Use attachment if necessary)	ATE RIDA	
ARTICLE V: Effective date, if other than 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.)

Paniel Flesher
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)