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SECRETARY OF STATE

AUG - 9 2011 EXAMINER

COVER LETTER

PO: * Registration Section

Division of Corporations
SUBJECT: MOCHA'S DESIGNS 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:
JEFFREY H. ISRAEL
Name of Person
MOCHA'S DESIGNS LLC
Firm/Company
3600 NE 170TH ST #202
Address
NORTH MIAMI BEACH, FL 33160
City/State and Zip Code
MOCHADESIGNS10@GMAIL.COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JEFFREY H ISRAEL at (305) 794-0788
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MOCHA'S DESIGNS 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:
MOCHA'S DESIGNS LLC	MOCHA'S DESIGNS LLC
3600 NE 170TH ST #202	3600 NE 170TH ST #202
NORTH MIAMI BEACH, FL 33160	NORTH MIAMI BEACH, FL 33160

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:

JEFFREY H. ISRAEL

Name

3600 NE 170TH ST. #202

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

NORTH MIAMI BEACH FL 33160-3157

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)

ARTICLE IV- Manager(s) or	r Managing Member(s):
Title: "MGR" = Manager	Manager or Managing Member is as follows: SECRETARY OF STA TALLAHASSEE, FLOR
"MGRM" = Managing Membe	er
MGRM	JEFFREY H. ISRAEL
	3600 NE 170TH ST #202
	NORTH MIAMI BEACH, FL 33160
MGRM	. ANA MARIA PORTOCARRERO
	15676 SUMMIT CIRCLE PLACE
•	NAPLES, FL 34119
(Use attachment if necessary)	
CLEV. Effective data if other th	nan the date of filing: (OPTIONAL)
	nust be specific and cannot be more than five business days pri
O days after the date of filing.)	must be specific and cannot be more than the business only p.
, and a second s	
REQUIRED SIGNATURE:	
	Israel
Signature of a	member or an authorized representative of a member.
(In accordance with sect	tion 608.408(3), Florida Statutes, the execution of this document

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)

constitutes a third degree felony as provided for in s. 817.155, F.S.)

Typed or printed name of signee

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