## 11000167612

	_				
(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·			
(Cit	y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(D.	siness Entity Nam	<u> </u>			
Dd)	Silless Linuty (Val)	16)			
(Do	ocument Number)				
Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
·	-				
		Î			
		ļ			
L					

Office Use Only

B. KOHR

SEP 2 0 2011

EXAMINER



700212059617

09/20/11--01023--011 \*\*125.00

11 SEP 20 PH 2: 25

OF THE CONTROL STATE
OF THE STATE OF

11 SEP 20 PH 3: 59

	CORPORATE ACCESS,	"When y	rou пeed ACCES	SS to the world"	•
	INC. P.O. Box	236 East 37066 (32315-7066	6th Avenue . Tallahas (850) 222-266	see, Florida 32303 66 or (800) 969-1666 . Fax (8	350) 222-1666 July 200
	p	PICK UP:	WALK IN	Aludo	SER 20 M
	CERTIFIED COPY PHOTOCOPY			- Concord	υς. 
	CUS FILING		LLC		
1.	MBCC, L (CORPORATE NAME AND D	OCUMENT#)			
2.	(CORPORATE NAME AND D	OCUMENT #)			
3.	(CORPORATE NAME AND D	OCUMENT #)			
4.	(CORPORATE NAME AND DO	OCUMENT #)			
5.	(CORPORATE NAME AND DO	OCUMENT #)			
<b>)</b> .	(CORPORATE NAME AND DO	OCUMENT #)			
PECIA	L INSTRUCTIONS:				

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY

ARTICLE I: NAME

The name of the Limited Liability Company is:

MBCC, LLC

ARTICLE II: ADDRESS

The mailing and street address of the principal office of the Limited Liability Company is:

17 Kinsley Place Canton, Massachusetts 02021

ARTICLE III: PURPOSE

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

ARTICLE IV: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:

Grant W. Kehres 2000 Glades Road, Suite 302 Boca Raton, Florida 33431

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 property 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

## **ARTICLE V - MANAGEMENT:**

The Limited Liability Company is to be managed by the members and is, therefore, a member - managed company. The name and address of the managing members are:

Title: Managing Member Antonio Corsano 17 Kinsley Place Canton, MA 02021

Title: Managing Member Antonetta Corsano 17 Kinsley Place Canton, MA 02021

## ARTICLE VI - EFFECTIVE DATE:

The effective date for this Limited Liability Company shall be:

The date these Articles are filed at the office of the Florida Secretary of State.

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.)

GRANT W. KEHRES, authorized representative of Antonetta Corsano, Member Typed or printed name of signee.