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11 OCT 11 PH 2: 58
SECOLOMORE DE STATE

B. BOSTICK

OCT 1 2 2011

EXAMINER

COVER LETTER

TO: Registration of	on Section Corporations	€.			
_{SUBJECT:} Mer	idian 10, LLC			_	
	Name of Limited	Liability Company			
The enclosed Article	es of Organization and fee(s) are su	bmitted for filing.			
Please return all corr	respondence concerning this matter	to the following:			
Marina	Barturen, Esquire				
		iame of Person			
The La	w Offices of Marina	Barturen			
	F	irm/Company .			
100 S.E	E. 2nd Street, Suite 20	610			
		Address	D.c		
Miami, F	lorida 33131		LLA:	30 11	·T
	City/S	State and Zip Code	25. 25.		4 127 5.77
barturenla	aw@yahoo.com		in .	;	erena di
Makes #81	E-mail address: (to be used for	future annual report notification)	m		2942
For further informati	on concerning this matter, please c	all:	LOR	2: 55	-
Marina Barture	en, Esquire	at (305) 423-3500	IDA A	Ü٦	
Na	me of Person	Area Code & Daytime Telephone Nun	nber		
Enclosed is a check	k for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certified (additional copy is enclosed) Certified Certified	0 Filing F cate of Sta ed Copy nal copy is e	itus &	
	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 1 - Name:

The name of the Limited Liability Con	npany is:	
Meridian 10, LLC		
(Must end with the words "Lis	mited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limited	l Liability Company is:
Principal Office Address:	Mailing Address:	
100 S.E. 2nd Street	100 S.E. 2nd Street	
Suite 2610	Suite 2610	
Miami, Florida 33131	Miami, Florida 33131	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	s own Registered Agent. You must designate an in	
The name and the Florida street addres	s of the registered agent are:	H OCT
Marina Barturei	n, Esquire	Tr 9
	Name	SS = Transmi

100 S.E. 2nd Street, Suite 2610

Miami

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.

City, State, and Zip

Florida street address (P.O. Box \underline{NOT} acceptable) FL 33131

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:

MGR/MGRM	Bruno Giocoladelli	
	100 S.E. 2nd Street, Suite 2610	
	Miami, Florida 33131	
MGR	Marina Barturen, Esquire	
	100 S.E. 2nd Street, Suite 2610	
	Miami, Florida 33131	SEUNE ANT
		SE STATE
(Use attachment if necessary)	***************************************	
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)	e date of filing:ee specific and cannot be more than five	, (OPTION business d

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.)

Marina Barturen, Esquire

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)