Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: MENDEZ ACCOUNTAX SERVICES, CORP

Account Number : 120060000145 Phone

: (305)769-4936

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**Enter the email address for this business entity to be 18ed for future annual report mailings. Enter only one email addres∈ please. **

FLORIDA LIMITED LIABILITY CO. MODO INVESTMENT, LLC.

Certificate of Status	0
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B. BOSTICK

FEB 2 0 2012

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EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

MODO INVESTMENT, LL C.

ARTICLE II- Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 13083 NW 23 ST PEMBROKE PINES, FL 33028

ARTICLE III- Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

ANGELA LUCCHESE

13083 NW 23 ST

PEMBROKE PINES, FL 33028

Having been named as registered agent and to accept service of process for the above stated limited liability Company at 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

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

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

Title:

Name and Address:

MGRM

ANGELA LUCCHESE

13083 NW 23 ST

PEMBROKE PINES, FL 33028

MGRM

ROSA E AZZATO 2463 PROVENCE CIRCLE WESTON, FL 33327

Signature of 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.)

ANGELA LUCCHESE

Typed or printed name of signee.