

# L/2000044168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

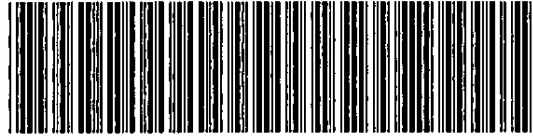
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100226172771

**EFFECTIVE DATE**  
*3-21-2012*

03/28/12--01026--024 \*\*125.00

FILED  
12 MAR 28 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**K. SALY**  
**EXAMINER**  
**MAR 30 2012**

**BARBARA B. GIMENEZ, P.A.**  
Attorney at Law

7001 Biscayne Boulevard, 2<sup>nd</sup> Floor  
Miami, Florida 33138

Telephone: (305) 759-9997  
Telefax: (305) 759-9972

March 22, 2012

Registration Section  
Division of Corporations  
P O Box 6327  
Tallahassee, Florida 32314-6327

**RE: Filing Articles of Organization for COSTIN MONEY LLC**

Dear Sir or Madam:

Enclosed please find Articles of Organization for the captioned LLC and \$125 filing fee.

Should you have any questions or comments, please do not hesitate to contact me.

Very truly yours,



BARBARA B. GIMENEZ

Enclosures as noted.

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

EFFECTIVE DATE  
3-21-2012

**COSTIN MONEY 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:**

c/o Barbara B Gimenez PA  
7001 Biscayne Boulevard 2nd Floor  
Miami, Florida 33138

c/o Arthur Costonis  
105 High Road  
Newbury, Massachusetts 01951

**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.)

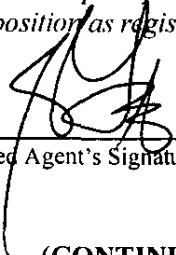
The name and the Florida street address of the registered agent are:

Barbara B. Gimenez, Esquire  
Name

7001 Biscayne Boulevard 2nd Floor  
Florida street address (P.O. Box **NOT** acceptable)  
Miami, FL 33138  
City, State, and Zip

FILED  
12 MAR 28 AM 10:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 Managing Member(s):**

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

MITCHELL MANTIN  
7924 WEST SAHARA AVENUE  
LAS VEGAS, NEVADA 89117

MGRM

ARTHUR COSTONIS  
105 HIGH ROAD  
NEWBURY, MASSACHUSETTS 01951

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: MARCH 21, 2012 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after 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.)

**BARBARA B. GIMENEZ**

\_\_\_\_\_  
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)