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•				
(Requestor's Name)				
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(City/Si	tate/Zip/Phone #	)		
PICK-UP	WAIT	MAIL		
(Busine	ess Entity Name)	:		
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filir	ng Officer:			
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SECRELARY OF STATE

N. Culligan APR 27 2012,

## **COVER LETTER**

10:	Registration of	n Section Corporations		
SUBJI	ECT: MVS	RACING, LLC		
3020		Name of Limite	d Liability Company	
The en	closed Article	es of Organization and fee(s) are s	ubmitted for filing.	
Please	return all corr	respondence concerning this matte	er to the following:	
	DOMINIC	SCHEER		
			Name of Person	
	MVS RAC	CING		
	The state of the s		Firm/Company	
	7210 SW	86 AVE		
			Address	
1	MIAMI / FL	ORIDA / 33143		
	50111101	•	/State and Zip Code	
	DOMINIC	SCHEER@ME.COM	or future annual report notification	
F 6				
ror lur	ther informati	on concerning this matter, please	call:	r
DOM	INIC SCH	EER	786 5547508	3
	Na	me of Person	Area Code & Daytime To	elephone Number
Enclos	sed is a check	k for the following amount:		
\$125.00	) Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MVS RACING, LLC		
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited Liability Co	ompany is
Principal Office Address:	Mailing Address:	
7210 SW 86 Ave	7210 SW 86 AVE	
MIAMI, FLORIDA, 33143	MIAMI, FLORIDA, 33143	

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 (REOUTRED)

C .....

(CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Me

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	YUSEF EL MASRI URB. PREBO CALLE 133 EDIF SAN ANDRES V PISO 6 APTO 6-B VALENCI
MGRM	DOMINIC LEE SCHEER 7210 SW 86 AVE MIAMI FL 33143
<del> </del>	
(Use attachment if necessary)	
effective date is listed, the date must b 00 days after the date of filing.)  REQUIRED SIGNATURE:	e date of filing:
(In accordance with section 608 constitutes an affirmation unde I am aware that any false information constitutes a third degree felonger	er the penalties of perjury that the facts stated herein arcticles mation submitted in a document to the Department of pale by as provided for in s.817.155, F.S.)
	ped 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)