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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I20000000019 Phone : (305)552-5973 Fax Number : (305)220-1440

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

<u> Finalli</u>	Address:			

## FLORIDA LIMITED LIABILITY CO. MRR INVESTMENT LLC

Certificate of Status	1
Certified Copy	0
Page Count	0.3
Estimated Charge	\$130.00

Electronic Filing Menu Corporate Filing Menu

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ARTICLE I - Name:

## H12000144065

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

: 4 -

The name of the Limited Liability Company is:	
MRR INVESTMENT 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	<b>S:</b>
Principal Office Address: Mailing Address:	
13727 SW 152 St#300 SAME MIAMI FL 33177	
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:	
ROBB & ROBSON.	
Name	
13727 Sw 152 # 300	
Plorida street address (P.O. Box NOT acceptable)	
Momi 33177	
City, State, and Zip	
Having been named as registered agent and to accept service of process for the above stated limite 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 a 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 (A8, FS).	all
Registered Agent's Signature (REQUIRED)	The same
Registrati Agent V Signature (REQUIRED)	C
(CONTINUED)	

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<u>[itle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
MGRM	ROBB R ROBSON 13727 SW 152 St #300 Micmi FL 33177
·	
·	
·	
(Use attachment if necessary)	
LEV: Effective date, if other than the	he date of filing:  be specific and cannot be more than five business
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	be specific and cannot be more than five business
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.)  REOUIRED SIGNATURE:  Signature of a mean (in accordance with of this document contains the filing date of the filing date.)	the date of filing:  the specific and cannot be more than five business  the of an authorized representative of a member.  section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury different are true.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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