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SECRETARY OF STATE
TALLAHASSEE TSTATE

D. BRUCE

SEP 2 0 2012

**EXAMINER** 

# **COVER LETTER**

Division of Corporations		
SUBJECT: MGM WORLDWIDE ENTEPRISES LLC Name of Limited Liability Company		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
BRISSETTA R. GUNNER Name of Person		
MGM WORLDWIDE ENTERPRISES, LLC Firm/Company		
3577 AURSHIRE ST. Address		
JACKSONVILLE, FL 32226		
City/State and Zip Code  BRISSETTA R. GUNNER		
E-mail address: (to be used for future annual report notification)	2 SI	
25 mg/	43S	3
For further information concerning this matter, please call:	9	
BRISSETTA R. GUNNER. at (904) 885-4027  Name of Person Area Code & Daytime Telephone Number	附 4: 32	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\ \times 130.00 Filing Fee & Certificate of Status \$\ \times 155.00 Filing Fee & Certificate of Status \$\ \times 160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\ \times 160.00 Filing Fee, Certified Copy (additional copy is enclosed)	)	
Mailing Address  Registration Section  Street/Courier Address  Registration Section		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:** 

**Mailing Address:** 

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:

17 AYRSHIRE ST.

Florida street address (P.O. Box NOT acceptable)

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)

Page 1 of 2

EFFECTIVE DATE 199

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR — Managing Member	BRISSETTA R. CHUNNER 3517 AYRSHIRE ST. JACKSONVILLE FL 32226
MGR	ANTHONY MATHURIN SR. 4126 INVERPARY BLVD, APT 2513 LAUDERHILL, FL 33819
MGR	ANTHONY MATHURIN JR. 3577 AMRSHIRE ST. JACKSONVILLE, PL 32226
(Use attachment if necessary)	
FICLE V: Effective date, if other than an effective date is listed, the date must r 90 days after the date of filing.)	the date of filing: $9/17/2012$ . (OPTIONAL) st be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
	ta R. Hines mber or an authorized representative of a member.
(In accordance with section constitutes an affirmation u	608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.)
Beisse	TYPED OF Printed name of signee
Filing Foos	SSR 19 T

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

\$ 5.00 Certificate of Status (Optional)