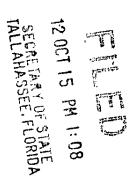
# L120UU132139

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	÷#)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to	Filing Officer:				



500240797385

10/15/12--01025--021 \*\*125.00



B. KOHR

OCT 1 7 2012

EXAMINER

### **COVER LETTER**

TO:	Registration of	on Section f Corporations							
SUBJ	ест:	MAC	Investigation Name of Limit				<u></u>	<u> </u>	-
The er	iclosed Article	es of Organization	n and fee(s) are	e submitted	for filing.				
Please	return all con	respondence con	erning this ma	itter to the	following:			,	٠,٠٠٠
		FRANC	CISCO	Oca	S10 .	Je_		SECRE	200
			Compa	Name of	Person  HEES	ECAKE		ARSSEE FI	15 PH 1: 08
	4981	S. W.	95 m	AVE				OMO	12 B
			•	Addr					
	C	20 PER	CITY	F	1	3.	332	8	
		_							
	<del> </del>	E-mail add	ress: (to be used	for future a	unnual report	notification)	<u> </u>		
For fu	rther informati	ion concerning th	is matter, pleas	se call:					
		wy Si me of Person	LVA	_ at (_ <i>9</i>	54 Area Code &	439 Daytime Tele	- OS phone Nur	198 mber	
Enclo	sed is a checl	k for the follow	ing amount:						
<b>\$</b> 125.00	) Filing Fee	\$130.00 F Certificat	iling Fee & te of Status	Cert	i.00 Filing ified Copy tional copy is		Certifi Certifi	00 Filing F cate of Sta ed Copy nal copy is en	tus &
		P.O. Box 6	n Section f Corporations		Registration Division of Clifton Buil	Corporations ding tive Center C			

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

ARTICLE I - Name: The name of the Limited	Liability Compan	y is:			خ سالم المسالم			
M.A.C I	NVESTMENT	Group	L.L.C.	SECTE	027			
(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 Addres	<u>ss:</u>	Mailing	Address:		P			
4981 S.W. G	5 <sup>n</sup> Aue C 33328	498 Cape	31 SW cr City,	95 A Ave FL 3332	, B			
ADTICLE III Dogisto	red Agent Degist	arad Office A	Pagistamad	Agant'a Signa	- tuwa			

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

business entity with an active Florida registration.)

FRANCISCO OCASIO JR

Name

4981 S.U. 95<sup>th</sup> Ave

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

Cooper Cty FL 33328

City, State, and Zip

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

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..

Régistered 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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (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:**

(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.)

enature of a member or an authorized representative of a member.

NCISCO UCASIO JR
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)