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B. BOSTICK
FEB - 5 2013
EXAMINER

COVER LETTER

TO: **Registration Section Division of Corporations**

nc

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Firm/Company SW 158 Address Miami City/State and Zip Code madelinesantan a gmail. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Number

Enclosed is a check 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is | : |
|--|---|
| The Girls Spo | |
| ARTICLE II - Address: | principal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 14551 SW 158 COURT MIRMI IFL 33196 | 14551 SW 158 COURT MIAMI , FL 33196 |
| ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.) | d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another |
| The name and the Florida street address of the | registered agent are: |
| Madeline Jim | |
| 14561 SW 158 C | ourt EB |
| Florida street ac | idress (P.O. Box NOT acceptable) |
| • | state, and Zip accept service of process for the above stated limited |
| liability company at the place designated in | this certificate, I hereby accept the appointment as |

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

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 | Name and Address: |
|--|---|
| "MGRM" = Managing Member | |
| MGR | Madeline Jimenez Santana 14551 SW 158 Court Miami, fc 33196 |
| · | |
| . | 13 FEB |
| | ASSET AM II. |
| (Use attachment if necessary) | PARIDE CORDO |
| CLE V: Effective date, if other than the | e date of filing: (OPTIONAL) |
| | t be specific and cannot be more than five business |

REQUIRED SIGNATURE:

Signature of a member of 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.)

adeline Jimenez - Santana
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)