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B. BOSTICK JUL **1 6** 2013

EXAMINER

(850) 245-6051.

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT. Miami Vice Burgers, 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:

Romy B. Jurado Name of Person Jurado Law Firm , P.A Firm/Company 12955 Biscayne Boulevard Suite 328 Address North Miami, FL 33181 City/State and Zip Code Romy@juradolawfirm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Romy Jurado Name of Person Area Code & Daytime Telephone Number 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:

ity Company, "L.L.C.," or "LLC.")		
incipal office of the Limited L	Liability Co	mpany is:
Mailing Address:		
12955 Biscayne Boulevard		
Suite 328		
North Miami, FL 33181		
	ividual or anoth	
28	C .	ਜ਼ 🥌
ress (P.O. Box <u>NOT</u> acceptable)	_ ≅∴ (0
FL	## C	∞
nte, and Zip		
	Mailing Address: 12955 Biscayne Boulevard Suite 328 North Miami, FL 33181 Office, & Registered Agentered Agent. You must designate an indices agent are: 28 Iress (P.O. Box NOT acceptable) FL	Mailing Address: 12955 Biscayne Boulevard Suite 328 North Miami, FL 33181 Office, & Registered Agent's Signatuered Agent. You must designate an individual or another egistered agent are:

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	er	
Gary Romain MGRM	5509 Joel Lane	_
	Temple Hills, MD 20748	-
		
		SILCI
		HIT E
		SE SE
		15 F
		F: Co
		
(Use attachment if necessary)		
LE V: Effective date if other t	han the date of filing: (OPTIONA
effective date is listed, the dat	e must be specific and cannot be more than fi	ive busines
or 90 days after the date of fi	ling.)	
DECLUDED GLOW A STIDE		
REQUIRED SIGNATURE:	(//	
Signature of a	member of an authorized representative of a member.	
(In accordance with seconstitutes an affirmation	tion 608.408(3). Florida Statutes, the execution of this docu	are true.
I am aware that any fals constitutes a third degre	te information submitted in a document to the Department of the long as provided for in s.817.155, F.S.)	or State

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)

Typed or printed name of signee