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EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations** MASSWEBB 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: Massood Oskooei Name of Person MASSWEBB LLC Firm/Company 601 S.W. Fredrica Street Port Saint Lucie, FL 34983 City/State and Zip Code moskooei333@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Massood Oskooei Name of Person Enclosed is a check for the following amount: □\$155.00 Filing Fee & □ \$160.00 Filing Fee, □\$125.00 Filing Fee **■**\$130.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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

	e Limited Liability Company	15.	
MASSWEBB LLC.			
	(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II -	Address:		
The mailing add	dress and street address of the	principal office of the Limited Liab	ility Company is:
Principal Offic	e Address:	Mailing Address:	
601 S.W. Fredrica	Street	601 S.W. Fredrica Street	
Port Saint Lucie, Fl	. 34983	Port Saint Lucie, FL 34983	
ADTICLE III	Dagistared Agent Dagista	red Office & Registered Agent's S	Signature:
(The Limited Liabili	- Registered Agent, Registe by Company cannot serve as its own Ro an active Florida registration.)	red Office, & Registered Agent's Segistered Agent. You must designate an individu	al or another
(The Limited Liabili business entity with	ty Company cannot serve as its own Ro	gistered Agent. You must designate an individu	al or another
(The Limited Liabili business entity with	ty Company cannot serve as its own Ro an active Florida registration.)	gistered Agent. You must designate an individu	al or another 2213 JU ALCAI
(The Limited Liabili business entity with	ty Company cannot serve as its own Ro an active Florida registration.) he Florida street address of the Massood Oskooei	gistered Agent. You must designate an individu	al or another 2213 JU ALCAI
(The Limited Liabili business entity with	ty Company cannot serve as its own Ro an active Florida registration.) he Florida street address of the Massood Oskooei	egistered Agent. You must designate an individu	al or another 2819 JUL 26 P SECRETARY 0
(The Limited Liabili business entity with	ty Company cannot serve as its own Ro an active Florida registration.) the Florida street address of the Massood Oskooei Na 601 S.W. Fredrica Street	egistered Agent. You must designate an individu	al or another 2819 JUL 26 P SECRETARY 0
(The Limited Liabili business entity with	ty Company cannot serve as its own Ro an active Florida registration.) the Florida street address of the Massood Oskooei Na 601 S.W. Fredrica Street	egistered Agent. You must designate an individu ne registered agent are: me address (P.O. Box <u>NOT</u> acceptable)	al or another 2813 JUL 26 P SELETARY G

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 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:

"MGR" = Mana "MGRM" = Ma	ger naging Member	Name and Address:
MGR		Massood Oskooei
	· ···	601 S.W. Fredrica Street
		Port Saint Lucie, FL 34983
MGR		Kerisa Francis-Oskooei
	··· ·	601 S.W. Fredrica Street
		Port Saint Lucie, FL 34983
MGRM		Errol Webb
		344 S.E. Crosspoint Drive
		Port Saint Lucie, FL 34983
•	• /	e date of filing: (OPTIO
LE V: Effective ffective date is or 90 days afte	date, if other than the listed, the date must the date of filing.)	e date of filing: (OPTIO
LE V: Effective ffective date is or 90 days afte	e date, if other than the listed, the date must the date of filing.) IGNATURE:	e date of filing: (OPTIO
ffective date is or 90 days afte REOUIRED Si (In ac consti	e date, if other than the listed, the date must the date of filing.) IGNATURE: Signature of a member coordance with section 60 tutes an affirmation underware that any false information for the date of the dat	st be specific and cannot be more than five bu
LE V: Effective ffective date is or 90 days afte REQUIRED Si (In acconsti	e date, if other than the listed, the date must the date of filing.) IGNATURE: Signature of a member coordance with section 60 tutes an affirmation underware that any false information for the date of the dat	er an authorized representative of a member. 8.408(3). Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of 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)