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### **COVER LETTER**

TO: Registration Section **Division of Corporations** 

MAYORGA COFFEE COMPANY, 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:

# MARTIN MAYORGA Name of Person MAYORGA COFFEE COMPANY, LLC Firm/Company 1615 SW 8TH STREET Address MIAMI, FL 33135 City/State and Zip Code LORENA@MAYORGACOFFEE.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LORENA HERRADA at ( 3158093 X 102 Name of Person Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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

MAYORGA COFFEE CO		##: : H:12: G	**	_	
	(Must end with the words	s "Limited Liability Company, "L.L.C.," or "LLC	.")		
ARTICLE II - Ad- The mailing addres		principal office of the Limited Liability Company	is:		
Principal Office A	ddress:	Mailing Address:			
1615 SW 8TH STREET		1615 SW 8TH STREET		_	
MIAMI, FL 33135		MIAMI, FL 33135		_	
another business er	lity Company cannot serve a ntity with an active Florida a Florida street address of the		an indiv	idual c	r
	MARTIN MAYORGA		全部	E33	1 ÿ
		Name	188E	ည်	7
	900 BISCAYNE BLVD. UNIT		المالية. الحاليات	<b>&gt;</b>	
	Florida street address	(P.O. Box NOT acceptable)			
	MIANII	FL 33132		ည	**************************************
	City	Zip	(D) (1)	w	
the place design capacity. I furthe	nated in this certificate, I her ir agree to comply with the p d I am familiar with and acc	accept service of process for the above stated limit reby accept the appointment as registered agent an provisions of all statutes relating to the proper and the obligations of my position as registered agent the obligations of my position as registered agent the following the control of the proper and control of the proper and the the pr	d agree complet	to act i e perfo	in this rmance
	(C	ONTINUED)			

Page 1 of 2

AMBR" = Authorized Member  'MGR" = Manager  AMBR  KERRY MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI, FL 33132  MARTIN MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI, FL 33132  (Use attachment if necessary)  E. V: Effective date, if other than the date of filing:	MGR" = Manager	
WAMBR  KERRY MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI. FL 33132  MARTIN MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI. FL 33132  Use attachment if necessary)  E.V: Effective date, if other than the date of filing:	S	
WARTIN MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI, FL 33132  WARTIN MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI, FL 33132  Use attachment if necessary)  V: Effective date, if other than the date of filing:	MBR	WEDDY HAVE DO
MARTIN MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI, FL 33132   CV: Effective date, if other than the date of filing:		
WARTIN MAYORGA  900 BISCAYNE BLVD. UNIT 1101  MIAMI. FL 33132   EV: Effective date, if other than the date of filing:		
Use attachment if necessary)  2. V: Effective date, if other than the date of filing:		MIAIMI, FE 33132
Use attachment if necessary)  2. V: Effective date, if other than the date of filing:	AMBR	MARTIN MAYORGA
Use attachment if necessary)  V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
Signature of a member or an authorized representative of a member (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of the constitutes an affirmation under the penalties of perjury that the facts stated here I am aware that any false information submitted in a document to the Departmen constitutes a third degree felony as provided for in s.817.155, F.S.)		
V: Effective date, if other than the date of filing:		
Signature of a member or an authorized representative of a member (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of the constitutes an affirmation under the penalties of perjury that the facts stated here I am aware that any false information submitted in a document to the Departmen constitutes a third degree felony as provided for in s.817.155, F.S.)		
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V: Effective date, if other than the date of filing:		
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	(In accordance with section 605.02 constitutes an affirmation under the I am aware that any false information constitutes a third degree felony a MARTIN MAYORGA  Type	ed or printed name of signee  Filing Fees: