Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000136273 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORP USA

Account Number : 072450003255

Phone

: (305)634-3694

Fax Number

: (786)409-5946

Enter the email address for this business entity to be used for fut annual report mailings. Enter only one email address please.

Email	Address:		
-------	----------	--	--

FLORIDA LIMITED LIABILITY CO. MAGNUM INVESTMENTS & MANAGEMENT LLC

550	
유 _교	
品至	
ಸ್₹	

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

JUN 11 2014

J. BRUCE

6/10/2014

https://efile.sunblz.org/scripts/efileovr.exc

ASURADO

9696669906

PS:pt pt0Z/01/90



COVER LETTER

FUNDORA PROFESSIONAL SERVICES CORP.

4033 S.W. 95 Avenue Miami, Florida 33165

TO: Registration Section
Division of Corporations

SUBJECT: 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:

OATALINA STRUCTO

Name of Person

Address

Address

Address

Address

E-mail address: (to be used for future amplied as must report notification)

For further information concerning this matter, please call:

OATALINA STRUCTO

Name of Person

Address

Addres

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fcc

Certificate of Status

Vi\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) S160.90 Filing Fee,
Cartificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallshasson, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassoe, FL 32301

ARTICLES OF ORGANIZATION FOR PLOSIDALIMITED LIABILITY COMPANY

rility Company is:				
			or "LLC.")	
address of the princip	al office of the L	imited Linbility (Company is:	
	Mulling /	<u>lddreser</u>		
	SAME_			
ny cannot serve as its on active Florida registr	own Registered A adion.)	l Agent's Signal gent. You must d	ore: lesignato an ir	ndividual or
ot address of the regist	cred agent are:			
		 	•	•
MAMI	<u>P1, </u>	33196		•
rod agerd and to occept carefleate. I hardy accomply with the provision that with and accopt the Registered Agent's Signature (CONTI)	ent the appointment of all statutes obligations of my happy 603, P.S. Enature (REQUIR	to for the above sent as registered relating to the properties of the proper	agent and ag oper and com	red to act in this blets performance
	agent, Registered Officer Registered Officer States of the principal agent, Registered Officer CATAI CATAI 19051 da stroct address (P.O. MIAMI City Broad agent and to cacep a cartificate. I harsby accomply with the provision iter with and accapt the Registered Agent's Signature of Agent's Signat	MESTMENTS & MANAGEMENT II and with the words "Limited Liability Con an address of the principal office of the Liability of the SAME Agent, Registered Office, & Registered Augent, Registered Augent serves of the registered agent are: CATALINA BRITO Name 19051 SW 136 STREE da stroct address (P.O. Box NOT accept the appointment of the strong of the strates of the registered agent and to accept service of process a certificate. I hardly accept the appointment of the strates of the with and accept the obligations of all statutes of the with and accept the obligations of my Rhapper 603, P.S.	Manifer Service of process of the registered agent are: CATALINA BRITO NAME MANIFE 19051 SW 136 STREET da street address (P.O. Box NOT acceptable) Michigan Address (P.O. Box NOT acceptable) Michigan Address (P.O. Box NOT acceptable) MICHIGAN AGENTS Signature (REQUIRED) (CONTINUED)	MESTMENTS & MANAGEMENT II C and with the words "Limited Liabillo," Company, "L.L.C.," or "LLC.") Maddress of the principal office of the Limited Liability Company is: Malling Address: SAME Agent, Registered Office, & Registered Agent's Signature: any cannot serve as its own Registered Agent. You must designate an in active Florida registered agent are: CATALINA BRITO Name 19051 SW 136 STREET da stroct address (P.O. Box NOT accoptable) MIAMI City Tip Total agent and to cacept service of process for the above stated limited is cartificate. I hardly accept the appointment as registered agent and agentyle and agentyle with the provisions of all statutes relating to the proper and compiler with the provisions of all statutes relating to the proper and compiler with and accept the obligations of my position as registered agent as Sharper 605, P.S. Registered Agent's Signature (REQUIRED) (CONTINUED)

b∀CE 03\0¢

CORPUSA

06/10/2014 14:24 302633366

Title:	Name and Address:
'AMBR" = Authorized Member	TOWNSHIP THE PARTY OF THE
MGR" = Manager	
MGR	CATALINA BRITO
	19051 SW 138 STREET
	MIAMI, FL 33198
Use anachment if necessary)	•
EV: Effective date, if other than the date of ctive date is listed, the date must be spec	f filing: (OPTIONAL)
CV: Effective date, if other than the date of ctive date is listed, the date must be spec f filing.)	f filing:(OPTIONAL) His and cannot be more than five business days prior to or 90 days after
CV: Effective date, if other than the date of ctive date is listed, the date must be spec f filing.)	f filing: (OPTIONAL) His and cannot be more than five business days prior to or 90 days after
CV: Effective date, if other than the date of ctive date is listed, the date must be spec f filing.)	f filing:(OPTIONAL) His and cannot be more than five business days prior to or 90 days after
CV: Effective date, if other than the date of ctive date is listed, the date must be spec f filing.)	f filing:(OPTIONAL) His and cannot be more than five business days prior to or 90 days after
CV: Effortive date, if other than the date of ctive date is listed, the date must be specifilling.) CVI: Other provisions, if any.	f filing:(OPTIONAL) His and cannot be more than five business days prior to or 90 days after
CV: Effortive date, if other than the date of ctive date is listed, the date must be specifilling.) CVI: Other provisions, if any.	f filing:(OPTIONAL) His and cannot be more than five business days prior to or 90 days after
CV: Effective date, if other than the date of ctive date is listed, the date must be spec filling.) CVI: Other provisions, if any.	f filing:(OPTIONAL) elific and cannot be more than five husiness days prior to or 90 days after
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	ther or an authorized representative of a member.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifilling.) EVI: Other provisions, if any. SEQUIRED SIGNATURE: Signature of a first (in accordance with section 605.	ther or an authorized representative of a member.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. SEQUIRED SIGNATURE: Signature of a first (in accordance with section 605. constitutes an affirmation under	ther or an authorized representative of a member. 10203 (1) (b), Florida Statutes, the execution of this document the penaltics of periory that the facts stated herein are true.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a first (in accordance with section 605. constitutes an affirmation under 1 am aware that any false information.	ther or an authorized representative of a member. 10203 (1) (b), Florida Statues, the execution of this document the penaltics of perjury that the facts stated herein are true.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a first (in accordance with section 605. constitutes an affirmation under 1 am aware that any false information.	iber or an authorized representative of a member. 10203 (1) (b), Florida Statues, the execution of this document the penalties of perjury that the facts stated herein are true. 2020 at the penalties of perjury that the facts stated herein are true.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any. Signature of a first (in accordance with section 605. constitutes an affirmation under 1 am aware that any false information.	ther or an authorized representative of a member. 10203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. 10203 at a document to the Department of State as provided for in x,817.155, F.S.)
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if may. EEOURED SIGNATURE: Signature of a frem (In accordance with section 605. constitutes an affirmation under 1 am sware that any false informacionstitutes a third degree felony.	ther or an authorized representative of a member. 1.0203 (1) (b), Florida Smares, the execution of this document the penalties of perjury that the facts stated herein are true. 1.0203 (1) (a) A state of the Department of State as provided for in x.817.155, F.S.)
EV: Effective date, if other than the date of citive date is listed, the date must be specifiling.) EVI: Other provisions, if may. EEOURED SIGNATURE: Signature of a frem (in accordance with section 605. constitutes an affirmation under 1 am sware that any false informacion status a third degree felony.	ther or an authorized representative of a member. 10203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. 10203 at a document to the Department of State as provided for in x,817.155, F.S.)
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if may. EEOURED SIGNATURE: Signature of a frem (In accordance with section 605. constitutes an affirmation under 1 am sware that any false informacionstitutes a third degree felony.	Der or an authorized representative of a member. 0203 (1) (b), Florida Statutes, the execution of this document the penaltics of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in x.817.155, F.S.) CATALINA BRITO Typed or printed name of signce
EV: Effective date, if other than the date of ctive date is listed, the date must be specifilling.) EVI: Other provisions, if any. Signature of a first (in accordance with section 605, constitutes an affirmation under 1 am aware that any faire informations a third degree felony.	iber or an authorized representative of a member. 10203 (1) (b), Florida Statues, the execution of this document the penalties of perjury that the facts stated herein are true, ation submitted in a document to the Department of State as provided for in x.817.155, F.S.) CATALINA BRITO Typed or printed name of signce
EV: Effective date, if other than the date of active date is listed, the date must be specifilling.) EVI: Other provisions, if any. Signature of a first (in accordance with section 605, constitutes an affirmation under 1 am aware that any faire informations a third degree felony.	ther or an authorized representative of a member. O203 (1) (b), Florida Statutes, the execution of this document the penaltics of perjury that the facts stated herein are true. ation submitted in a document to the Department of State as provided for in x,817.155, F.S.) CATALINA BRITO Typed or printed name of signce

Page 2 of 2

9696669906