

L14000134448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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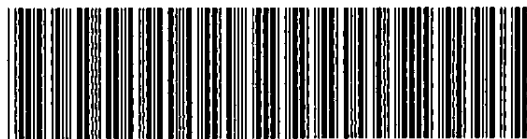
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

AUG 08 2014
D. BRUCE



August 7, 2014

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

Re: Order #: 9234693 SO
Customer Reference 1: None Given
Customer Reference 2: None Given

Dear Department of State, Florida :

Please obtain the following:

MGF REAL PROPERTY, LLC (FL)
Formation
Florida

MGF REAL PROPERTY, LLC (FL)
Certificate of Status-Domestic
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan
Senior Fulfillment Specialist
Connie.Bryan@wolterskluwer.com

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION

OF

MGF REAL PROPERTY, LLC

The undersigned Member or Authorized Representative of a Member signs these Articles of Organization and forms a limited liability company (the "*Company*") under the Revised Florida Limited Liability Company Act (the "*Act*"), as follows:

NAME

The name of the Company is: **MGF REAL PROPERTY, LLC**

MAILING ADDRESS AND STREET ADDRESS

The mailing address and street address of the principal office of the Company is:
9701 Collins Avenue, # 2204-S
Bal Harbour, FL 33154

NAME AND ADDRESS OF THE SOLE MANAGER

The name and address of the sole Manager of the Company is:
Walfrido S. M. Guia Neto
9701 Collins Avenue, # 2204-S
Bal Harbour, FL 33154

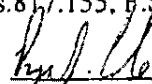
EXISTENCE

The Company's existence will commence upon filing.

INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the initial registered agent and office:
NRAI Services, Inc.
1200 South Pine Island Road
Plantation, FL 33324

In accordance with section 605.0203(1)(b), 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.




Ryan J. Coyle
Authorized Representative of Member

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE BY REGISTERED AGENT

I accept the appointment as Registered Agent of the Company to accept service of process on its behalf at the place designated in these Articles of Organization. I am familiar with, and accept, the obligations of my position as registered agent as provided for in the Act.


Asst. Secretary
NRAI Services, Inc.
1200 South Pine Island Road
Plantation, FL 33324

Dated: August 1, 2014

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CLERK OF STATE
ALLAHABAD, FLORIDA