

From:

09/02/2014 09:12

#138 P.001/004

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Debbie Thacker
Account Name : ALLEN DELL, P.A.
Account Number : I20040000136
Phone : (813) 223-5351
Fax Number : (813) 229-6682

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

Email Address: dthacker@allendell.com

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14 SEP -2 AM 6:50

DIVISION OF CORPORATIONS
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INFORMATION SERVICES

FLORIDA LIMITED LIABILITY CO.
M Associates, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

SEP 03 2014

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

**ARTICLES OF ORGANIZATION
OF
M ASSOCIATES, LLC**

The undersigned, acting as the authorized representative of the organizing member of a limited liability company under the Florida Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company (the "Company"):

ARTICLE I

Name

The name of the limited liability company is M ASSOCIATES, LLC.

ARTICLE II

Principal Office and Mailing Address

The principal office address of the Company is 44 Waterford Drive, Englewood, Florida 34223.

The mailing address of the Company is Post Office Box 130140, Tampa, Florida 33681.

ARTICLE III

Initial Registered Agent and Office

The street address of the initial registered office of the Company is 44 Waterford Drive, Englewood, Florida 34223, and the name of its initial registered agent at that address is Paul Melech.

ARTICLE IV

Management

The Company shall be manager-managed and the managers shall be as follows:

Paul Melech
44 Waterford Drive
Englewood, Florida 34223

Raymond M. Murray
3308 South Shamrock Road
Tampa, Florida 33629

Dated this 29 day of August, 2014.

By: Paul Melech

Name: Paul Melech

Title: Authorized Representative

FILED
14 SEP -2 PM 2:50
SECRETARY OF STATE
PALM BEACH, FLORIDA

From:

09/02/2014 09:14

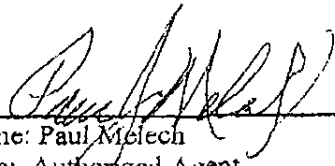
#138 P.003/004

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for M Associates, LLC, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the duties and obligations of the undersigned's position as registered agent.

Dated this 24 day of August, 2014.

REGISTERED AGENT:

By: 
Name: Paul Melech
Title: Authorized Agent

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14 SEP -2 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

From:

09/02/2014 09:14

#138 P.004/004

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

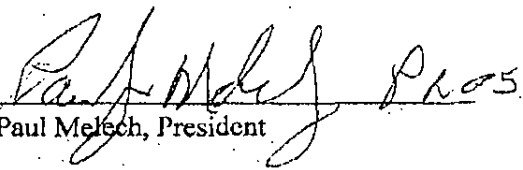
Re: M Associates, LLC

Dear Sir/Madam:

I hereby consent to the use of the name M Associates, LLC. The same individuals will be involved in M Associates, Inc. and M Associates, LLC.

Thank you.

M ASSOCIATES, INC.

By: 
Paul Melech, President

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14 SEP -2 PM 2:52
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TALLAHASSEE, FL 32314