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(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only/State/Elp// Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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January 28, 2015

YURII MURAVIA 92 NOTTINGHAM PL BOYNTON BEACH, FL 33426

SUBJECT: MIAMI LUX, LLC Ref. Number: W15000006199

We have received your document for MIAMI LUX, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 215A00001729

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Miami Lux, LLC Name o	of Limited Liability Company
The enclosed Articles of Organization and fee	e(s) are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
Yurii Muravia	N. O.
	Name of Person
	Firm/Company
92 Nottingham PL	Address
Boynton Beach, Fl 33426	
yuriim@gmail.com	City/State and Zip Code
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter	; please call:
Yurii Muravia Name of Person	at (<u>561</u>) <u>662-0616</u> Area Code Daytime Telephone Number
Name of Ferson	Area code Daytine reteptione Number
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □ \$130.00 Filing Fee Certificate of State	
Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ANDA LIMITED EIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
Miami Luxe, LLC	iability Company, "L.L.C.," or "LLC.")
(Must end with the Words "Limited L	nability Company, L.L.C., or LLC.
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
92 Nottingham PL Boynton Beach, FL 33426	92 Nottingham PL Boynton Beach, FL 33426
another business entity with an active Florida registration. The name and the Florida street address of the registered a	
<u>Yurii Muravia</u> Name	
Hame	
92 Nottingham PL Florida street address (P.O. Box I	NOT acceptable)
Boynton Beach, FL 33426	FL 33426
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	tice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r 605, F.S

(CONTINUED)

gnature (REQUIRED)

Registered Ag

Page 1 of 2

<u>Fitle:</u> 'AMBR" = Authorized Member	Name and Address:
'MGR" = Manager MGRM	Modine Missessia
IVIGRIVI	Vadim Muravia 8473 Serena Creek Ave,
	Boynton Beach, FL 33473
MGRM	Yurii Muravia
	92 Nottingham PL, Boynton Beach, FL 33426
MGRM	Sergiy Sinko
MOTAL	1361 S Federal Hwy, Apt 316
	Boca Raton, FL 33432
-	e date of filing: (OPTIONAL)
	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the ctive date is listed, the date must f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the ctive date is listed, the date must f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	a member an authorized representative of a member.
EV: Effective date, if other than the ctive date is listed, the date must filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with sections)	a member of a nauthorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document
EV: Effective date, if other than the ctive date is listed, the date must filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with sect constitutes an affirmation I am aware that any falso	Ta member an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State.
EV: Effective date, if other than the ctive date is listed, the date must filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with sect constitutes an affirmation I am aware that any falso	Ta member an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)