4/3/15, 10:47 AM

## Florida Department of State

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## FLORIDA LIMITED LIABILITY CO.

Certificate of Status	<u> </u>
Certified Copy	0
Page Count	03
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## **COVER LETTER**

TO:	Registration of	i Section Corporations		
SUBJ	ECT: MAZZI	CONSULTING, LLC		
		Name of Lin	nited Liability Company	
The er	iclased Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	atter to the following:	
	Eric P. G	tros-Dubois, Esq.		
	<del>-</del>	,	Name of Person	
	EPGD A	ttorneys at Law, P.A.		
			Firm/Company	
	2701 Po	nce de Leon Blvd., Ste. 20	<del></del>	
			Address	
	Coral Ga	bles, FL 33134		
_			ity/State and Zip Code	
<u>e</u>	ric@epgdlaw.o	E-mail address: (to be use	d for future annual report notifica	ution)
For fu	ther informatio	on concerning this matter, plea	ase call:	
Eric F	?. Gros-Dubois	s, Esq. at (	786 <sub>)</sub> 837-6787	
	Nar	ne of Person		lephone Number
Enclos	ed is a check fo	or the following amount:		
<b>☑</b> \$125.0	00 Filing Fee	\$130,00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & 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

AR	TICLES OF ORGANIZATION F	OR FLORIDA LIMITED LIABILITY (	COMPANY
ARTICLE I - Name: The name of the Limit	ted Liability Company is:		
MAZZI CONSULTIN	NG, LLC	<u> </u>	
(	(Must end with the words "Lim	nited Liability Company, "L.L.C.," o	r "LLC.")
ARTICLE II - Address a		nal office of the Limited Liability Co	ompany is:
Principal Office Add	ress:	Mailing Address:	
308 N Alafaya Trail Orlando, FL 32828		308 N Alafaya Trail Orlando, FL 32828	
(The Limited Liability another business entit	Company cannot serve as its or your company cannot serve as its or you with an active Florida registerida street address of the registerida street.	ered agent are:	
	EPGD Attorneys at Law, F		
	•	ame	
	2701 Ponce de Leon Blvd Florida street address (P.O.		
•			
	Coral Gables City	FL 33134 Zip	
the place designate capacity. I further a	as registered agent and to accep ed in this certificate, I hereby a agree to comply with the provisi am familiar with and accept th	ot service of process for the above sta ccept the appointment as registered a ons of all statutes relating to the prop e obligations of my position as regist hapter 605, F.S.	igent and agree to act in this per and complete performance
	EM		15 A
	·	ignature (REQUIRED)	PR-3
	(CONT)	•	MOG

Title:	Name and Address:
'AMBR" = Authorized Member 'MGR" = Manager	
MGR - Wallanger	MAZZI INVESTMENT INTERNATIONAL LLC
<del></del>	2701 Ponce de Leon Blvd., Ste. 202
	Coral Gables, FL 33134
<del></del>	
EV: Effective date, if other than the date of	of filing: (OPTIONAL)
f filiag.)	
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.)	
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) EVI: Other provisions, if any.	
EV: Effective date, if other than the date of ctive date is listed, the date must be spec-	
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:	effic and cannot be more than five business days prior to or 90
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:  Signature of a mem  (In accordance with section 605, constitutes an affirmation under I am aware that any false inform	ober 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, ation submitted in a document to the Department of State.
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 mem  (In accordance with section 605. constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	ober 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, ation submitted in a document to the Department of States as provided for in s.817.155, F.S.)
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