

L15000117680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

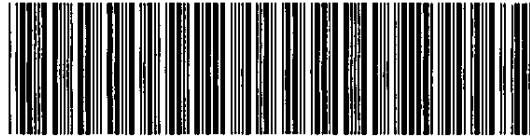
(Document Number)

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06/29/15--01002--003 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUL 13 AM 9:49

APPROVED
AND
FILED

Handwritten signature

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ORANGE MANGO LLC

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:

GIL WEINBERG

Name of Person

Firm/Company

3180 S. OCEAN DR APT 719

Address

HALLANDALE BEACH FL 33009

City/State and Zip Code

PASSALLFLYER@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GIL WEINBERG

561

9721101

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$160.00 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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2015

GIL WEINBERG
3180 S. OCEAN DR APT 719
HALLANDALE BEACH, FL 33009

SUBJECT: ORANGE MANGO LLC.
Ref. Number: W15000044866

We have received your document for ORANGE MANGO LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 215A00013846

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVED
AND
FILED

15 JUL 13 AM 9:49

ARTICLE I - Name:

The name of the Limited Liability Company is:

ORANGE MANGO LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3180 SOUTH OCEAN DRIVE
APARTMENT 719
HALLANDALE BEACH FL 33009

Mailing Address:

P.O. BOX 3292
HALLANDALE FL 33008-3292

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

GIL WEINBERG

Name

3180 SOUTH OCEAN DRIVE APT 719

Florida street address (P.O. Box **NOT** acceptable)

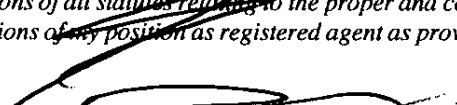
HALLANDALE BEACH FL 33009

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

15 JUL 13 AM 9:49

Gil Weinberg

3180 S. Ocean dr apt 719 Hallandale Beach, FL 33009

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMBR

Yaron Weinberg

3180 S. Ocean Dr apt 719 Hallandale Beach
FL 33009

AMBR

Zipi Weinberg

3180 S. Ocean Dr apt 719 Hallandale Beach
FL 33009

AMBR

Sarah Weinberg

3180 S. Ocean Dr apt 719 Hallandale beach
FL 33009

(Use attachment if necessary)

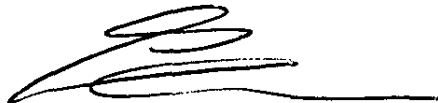
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(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.)

Gil Weinberg

Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)