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## FLORIDA LIMITED LIABILITY CO. M & F FAMILY LLC

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Page 1 of 2

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ARTICLE IV- Manager(s) or Man The name and address of each Manage	ger of Managing Member is as follows:
Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	FRANK M. FUEXTES
	HIAHI ENERCH PL 33139
HGRH	MIRTHA FUENTES
	114 2 SAN HARINO FER MIAHI BEACH PL 33139
HGRH.	SANDRA E. FUENTES
•	114 2 SAN MARINO TER HIBHI BEACH PL 33139
HGRH	FRANCISCO H. FUENTES JR.
	HIGHIDEALL PL 33137
(Use attachment if necessary)	ATTACHMENT
CLE V: Effective date, if other than the	date of filing: (OPTIONAL)
	be specific and cannot be more than five business days prior
<u>REQUIRED</u> SIGNATURE:	
	1 Ferriter
<u></u>	Ar or on authorized confessioning of a member.

(In accordance with acction 608.408(3), Florida Stantes, 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 \$.817.155, F.S.)

FRANK H. FULL
Typed or printed name of signee

Page 2 of 2

<u>litle:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
HGRM	REBECCA H. FUENTES 114 2 SAN MAQUINO TO HIAMI BEACH PL 331	5 ER 39
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Use attachment if necessary)  LE V: Effective date, if other than fective date is listed, the date mudays after the date of filing.)	the date of filing: (OPTIO st be specific and cannot be more than five business of	
REOUIRED SIGNATURE:	·	:
Signature of a me	Therester	
(In accordance with section constitutes an affirmation I am aware that any false i	on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State elony as provided for in s.817.155. F.S.)  FRANK H. FLIENTE S  Typed or printed name of signee	

Page 2 of 2

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