## L16000007743

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<del></del>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:





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03/02/15--01038--018 \*\*160.00

J. HARRIS

## **COVER LETTER**

TO:	Registration Sect Division of Corpo					
SUBJE	СТ:	IIZMI Name of Limi	EGAGROUP, LLC		Ä	201
		mendment and fee(s) are sub-	-		LARASSELT	2016 JAN 14 PM 2:03
		<u> </u>	SE A. PEREZ  Name of Person		一種と	2:03
		[12 M	ELA GROUP, LLC Firm/Company		-	
		11920	SW 171 TERRA	KCE	_	
			City/State and Zip Code			
r ca	la a de la companya		OMEGA GROUPE GMA o be used for future annual report notification	IL .COM		
	1	cerning this matter, please ca	at (305) 9(5-0)  Area Code Daytime T	.9C) Celephone Numbe	r	
Enclose	d is a check for the	following amount:				
□ \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Sta	itus &

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



July 6, 2015

IIZ MEGA CORP LLC 11920 SW 171 TERR MIAMI, FL 33177

SUBJECT: IIZ MEGA CORP LLC Ref. Number: W15000019269

We have received your document for IIZ MEGA CORP LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

The registered agent must sign accepting the designation.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 515A00014014



March 18, 2015

IIZ MEGA CORP LLC 11920 SW 171 TERR MIAMI, FL 33177

SUBJECT: IIZ MEGA CORP LLC Ref. Number: W15000019269

We have received your document for IIZ MEGA CORP LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 715A00005475

District Eq.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	112 MEG Must end with the words "D			"LLC.")
ARTICLE II - Addre The mailing address as	eas: nd street address of the princ	ipal office of the L	imited Liability Co	npany is:
Principal Office Add	CESS:	Mailing	Address:	,
11920 SW MIAML E	171 TERRACE - 33177	P.O. MIAN	BOX 451	534 3245
(The Limited Liability	tered Agent, Registered O Company cannot serve as its y with an active Florida regis	own Registered		
The name and the Flor	ida street address of the regi	-		
	LAUREN FE	RNANDE	Z, P. A.	
		Vame	<u></u>	
	1540 NORTHWE Florida street address (P.C	ST 1574 5	TREET RUAD	•
	Liouge intest address (L'r.		· ·	
	A A 11 A A 1		7 A A C	
	MIAM City	II PL	33125 Zip	
the place designate capacity. I further as	s registered agent and to accord in this certificate, I hereby gree to comply with the provi am familiar with and accept t	ept service of proce accept the appoint sions of all statutes	ess for the above statement as registered a relating to the prop	gent and agree to act er and complete perf
the place designate capacity. I further as	s registered agent and to accord in this certificate, I hereby gree to comply with the provi am familiar with and accept t	ept service of proce accept the appoint sions of all statutes he obligations of n	ess for the above statement as registered a relating to the prop	gent and agree to act er and complete perf
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"AMBR" = Authorized Member "MGR" = Manager	
MGR	JUSE L. PEREZ
A CANADA MANA MANA MANA MANA MANA MANA MANA	ZZSI SW 20 M STREET
•	MIAMI FL 33145
MLR	Jose A. PEREZ
Annual property and a property of the contract and a second of the contract and a	11920 SOVEWEST 171 TORRACE
- Control of the processor for a second of these or the Control of	make to the total the tota
(Use attachment if necessary)	
LE V: Effective date, if other than the date of i	filing: (OPTIONAL) ic and cannot be more than five business days prior to or 9
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LE V: Effective date, if other than the date of iffective date is listed, the date must be specifie of filing.)  LE VI: Other provisions, if any.	filing:(OPTIONAL) Ic and cannot be more than five business days prior to or 9
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LE V: Effective date, if other than the date of if fective date is listed, the date must be specific of filing.)  LE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a membe (in accordance with section 605.02	er of an authorized representative of a member.  203 (1) (b), Florida Statutes, the execution of this document
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ILE V: Effective date, if other than the date of ffective date is listed, the date must be specific of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member (in accordance with section 605.02 constitutes an affirmation under the lam aware that any false informatic constitutes a third degree felony as	er of an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true. ion submitted in a document to the Department of State

Page 2 of 2

\$ 5.00 Certificate of Status (Optional)

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