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(Re	questor's Name)	
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02-26-16

COVER LETTER

TO: Registration Section Division of Corporations
M
SUBJECT: MIDPOINT STRATEGIES LLC. Name of Limited Liability Company
. Hante of Emilieur Elability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
WESLEY PATTERSON Name of Person
Name of Person
MIDPOINT STRATEGIES LLC.
Firm/Company
760 JEFFERSON AVE. #16
Address
MIAMI BEACH, FL 33139 City/State and Zip Code
City/State and Zip Code
WESLEY PATTERSON, BIZ & GMAIL, COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
WESLEY PATTERSON at (786) 241 2130
Name of Person Area Code Daytime Telephone Number
į
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S160.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}
Mailing Address Street Address
New Filing Section New Filing Section
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
MIDPOINT STRATEGIES LLC (Must end with the words "Limited Liability C		
ARTICLE II - Address: The mailing address and street address of the principal office of the	Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
760 JEFFERSON AVE #KO MIAMI BEACH FL, 33139	760 JEFFERSON AVE #16 MIAMI BEACH FL, 33139	
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are: WESLEY PATTERSO Name	ZORETZ	18 FFB I
760 JEFFERSON AI	VC TIVE	<u> </u>
Florida street address (P.O. Box	: NOT acceptable)	P
MINNI SCACIL FL City State	33/39 ORD S	#: 50 #:

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..

(CONTINUED)

Wesley Patt
Registered Agent's Signature (REQUIRED)

Page 1 of 2

itle:	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
MGC	WESLEY PATTERSON
	760 JEFFERSON AVE #16
	MIAMI BEACH, FL 33139
	· 4
	# <u>#</u>
	<u> </u>
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