

L16000062785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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2016 MAR 30 P 4:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 31 2016

S MASON

March 21, 2016

Stacey Mason

Ref: The Marketing Net LLC

Ms. Mason,

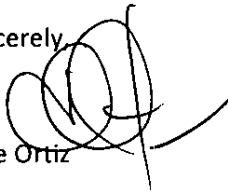
Please note that the intent of this letter is not to reinstate The Marketing Net Corp. , it is to release the name of The Marketing Net LLC in order to use it.

In reference to the letter you sent on Mary 12, 2015, I would like to ask for you to use the \$150 you have on file to file for The Marketing Net LLC.

Please let me know if you need anything else. My phone number is 407-413-0800.

Sincerely,

Jose Ortiz

A handwritten signature in black ink, appearing to be "Jose Ortiz", written over the printed name.

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Marketing Net 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:

Jose Ortiz

Name of Person

Firm/Company

13247 Hawtherton Circle

Address

Orlando, FL 32832

City/State and Zip Code

jortiz@themarketingnet.com

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

For further information concerning this matter, please call:

Jose Ortiz

Name of Person

at (

407

Area Code

) 413 0800

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**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
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:

The Marketing Net LLC

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

**ARTICLE II - Address:**

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

**Principal Office Address:**

Jose Ortiz  
13247 Hawtherton Cir.  
Orlando, FL 32832

**Mailing Address:**

Jose Ortiz  
13247 Hawtherton Cir.  
Orlando, FL 32832

**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:

Ivan M. De Leon

Name

1614 Plantation Pointe Dr.

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

Orlando

FL

32824

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..*

Ivan M. De Leon

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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:**

Jose Ortiz

13247 Hawtherton Cir.

Orlando, FL 32832

(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.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Jose Ortiz

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)

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TALLAHASSEE, FLORIDA