L16000141556

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL.		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:	·		

Office Use Only



800287506128

07/22/16--01016--015 **125.00

FILED
16 JUL 22 PM 1: 24
SECRETARISE FLORIDA



COVER LETTER

	egistration Section ivision of Corporations					
SUBJECT	MX5 Group LLC					
BODGECT		Limited Liabili	ty Company			
The enclos	ed Articles of Organization and fee(s) are submitted	for filing.			
Please retu	rn all correspondence concerning this	s matter to the f	ollowing:			
	Mark Patrick					
		Name of	Person			
	MX5 Group LLC					
	Firm/Company					
	132 Crown Colony Way					
	Address					
	Sanford, FL 32771					
	groupMX5@gmail.com	City/State and	d Zip Code			
-	E-mail address: (to be u	sed for future a	nnual report notification)			
For further in	nformation concerning this matter, pl	ease call:				
	Mark Patrick	407	324-7103			
	Name of Person	·	Daytime Telephone Number			
Enclosed is	s a check for the following amount:					
\$125.00 Fi	_	L-Certific	0 Filing Fee & \$160.00 Filing Fee, cd Copy al copy is enclosed) 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:			FILED 16 JUL 22 PM 1: 24
				16 JUI 22 DU . 5
MX5 Group LLC				24 PM 1: 24
(Must end wi	th the words "Limited	d Liability Co	mpany, "L.L.C.," or "LLC.")	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II - Address: The mailing address and street add	ress of the principal of	office of the L	imited Liability Company is:	
<u>Principal</u>	Office Address:		Mailing Add	lress:
132 Crown Colony Wa	ıv		132 Crown Colony Way	
Sanford, FL 32771	·		Sanford, FL 32771	
another business entity with an act The name and the Florida street ad	dress of the registered	d agent are:		
	132 Crown Colony Way Florida street address (P.O. Box NOT acceptable)			
	Sanford	FL	32771	
	City	State	Zip	
Having been named as registered ag place designated in this certificate, I further agree to comply with the prov am familiar with and accept the oblig	hereby accept the app visions of all statutes r gations of my position	pointment as revelating to the as registered	egistered agent and agree to acc proper and complete performan agent as provided for in Chapto Signature (REQUIRED)	t in this capacity. I nce of my duties, and I

Page 1 of 2

ARTICLE IV- The name and address of each person a		FILED
The name and address of each person a	uthorized to manage and control the Lin	nited Liability Company:
<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	SECRETARY OF STAT, TALLAHASSEE FLORIO
AMBR	Mark Patrick 132 Crown Colony Way Sanford, FL 32771	
AMBR	Michelle Patrick 132 Crown Colony Way	
	Sanford, FL 32771	
		1 11
(Use attachment if necessary)		
TICLE V: Effective date, if other than the date n effective date is listed, the date must be splate of filing.) e: If the date inserted in this block does not document's effective date on the Department	pecific and cannot be more than five but meet the applicable statutory filing requ	usiness days prior to or 90 days a
FICLE VI: Other provisions, if any.		
	1.5	
REOUIRED SIGNATURE:	Way Land	
This document is execu I am aware that any fak	tember or an authorized representative ted in accordance with section 605.020 are information submitted in a document tee felony as provided for in s.817.155, F	3 (1) (b), Florida Statutes. to the Department of State
Music No Partic	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)