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TALLAHASSEE, FLORIDA  
17 MAY 22 PM 5:24

M. MOON  
MAY 22 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 10, 2017

MIGUEL BORIS SUAREZ  
2165 SW 11TH TER  
MIAMI, FL 33135

SUBJECT: M.T GROUP LLC  
Ref. Number: W17000030835

RECEIVED  
17 MAY 22 PM 3:12  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA  
REGISTRATION SERVICES

We have received your document for M.T GROUP LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P95000061389.

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) 245-6052.

Matthew T Moon  
Regulatory Specialist II

Letter Number: 117A00006822

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FLORIDA  
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COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: M.T EXPRESS GROUP LLC  
Name of Limited Liability Company

17 MAY 22 PM 5:21

FILED  
SECTION OF STATE  
TALLAHASSEE, FL 32301

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIGUEL BORIS SUAREZ  
Name of Person

M.T EXPRESS GROUP LLC  
Firm/Company

2165 SW 11TH TERR  
Address

MIAMI FL 33135  
City/State and Zip Code

MIGUELBORIS085@GMAIL.COM / Miguel Boris 085@Gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MIGUEL BORIS SUAREZ 786 630-0853  
Name of Person at ( ) Area Code 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:

M.T EXPRESS GROUP LLC

(Must contain 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:

2165 SW 11TH TERR  
MIAMI FL 33135

Mailing Address:

2165 SW 11TH TERR  
MIAMI FL 33135

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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:

MIGUEL BORIS SUAREZ

Name

2165 SW 11TH TERR

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

MIAMI

FL

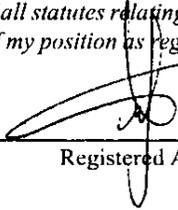
33135

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..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

MIGUEL BORIS SUAREZ

2165 SW 11TH TERR

MIAMI, FL 33135

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FLORIDA

(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.

MIGUEL BORIS SUAREZ

Typed or printed name of signer

**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)