Division of Corporations Electronic Filing Cover Sheet

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TO:

Division of Corporations

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From:

Account Name : SIEGFRIED, KIPNIS, RIVERA, LERNER, DE LA TORRE & MOCARSKI PA

Account Number : 076424000767 Phone : (305) 442-3334

Fax Number : (305) 443-3292

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Oriula A

FLORIDA LIMITED LIABILITY CO. MB FRANCHISE LLC

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COVER LETTER

TO: Registration Department Division of Corporations

SUBJECT: ___ MB FRANCHISE 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:

Oscar R. Rivera, Esq.
Siegfried, Rivera, Hyman, Lerner, De La Torre, Mars & Sobel, P.A.
8211 West Broward Boulevard, Suite 250
Plantation, Florida 33324
orivera@srhl-law.com

For further information concerning this matter, please call:

Oscar R. Rivera, Esq. Telephone: 954-781-1134

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ARTICLE I - NAME:

The name of the Limited Liability Company is: MB FRANCHISE LLC.

ARTICLE II - ADDRESS:

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

Principal Office Address:

Title:

2821 E. Commercial Blvd. - Suite 206 Ft. Lauderdale, Florida 33308

Mailing Address:

2821 E. Commercial Blvd. - Suite 206 Ft. Lauderdale, Florida 33308

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The Name and the Florida Street address of the Registered Agent is SKRLD, INC., 8211 West Broward Boulevard, Suite 250, Plantation, Florida 33324.

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.

ı) — — -

Oscar R. Rivera VICE PRESIDENT

Ft. Lauderdale, Florida 33308

Florida Bar No.:329193

Name and Address

ARTICLE IV - MANAGER/DIRECTORS

MGR

MAHMOUD MASHINA
2821 E. Commercial Blvd. -- Suite 206
Ft. Lauderdale, Florida 33308

MGR

BIANCA PANDOLFO
2821 E. Commercial Blvd. -- Suite 206

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REQUIRED SIGNATURE: Signature of a member or authorized representative of a member	
[In accordance with section 605.0203(1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)	
OSCAR R. RIVERA Type or printed name of signee	