Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20008800019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email Address:

FLORIDA LIMITED LIABILITY CO. MCMAHON, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	SOMI ANY
The name of the Limited 14.	
The name of the Limited Liability Company i	s:
- McMahon, LLC	
ARTICLE II - Address:	
Company address and street address of the	
The mailing address and street address of the Company is:	principal office of the Limited Liability
14123 SWCCS+ F F	- 234 51111.y
14123 SW 663+ , E#5 Mig	mi, Fl 33183
	35103
ARTICIEU	
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the Company cannot serve as its own Registered Agent. You must designate with an active Florida registration.)	lee-
Company cannot serve as its own Register address of the	registered agont
Company cannot serve as its own Registered Agent. You must designate with an active Florida registration.)	te an individual or another bush
	ousiness entity
Martha Lucia McMaton	
14 122 014	
-31 JES SW 6651, 1 5 Mi	ami ti 22100
14 123 SW 6657, E# 5 Min	METH, FT 33183
ARTICLE IV	
The name and title of each person and	_
The name and title of each person authorized to n Liability Company: (MGR or AMBR)	nanage and control the Limited
- LUCIA	Manghan (a)
	Mcmahon (AMBR)
	SE 28
	>()
	ASS SA
	Es

Required Signatures:

Signature of a member of an 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.

Martha McMahon
Typed or printed name of signee

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 (REOUIRED)