

L19000136676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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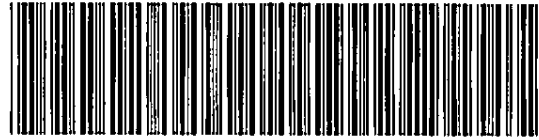
(Business Entity Name)

(Document Number)

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19 MAY 20 12:11:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

MAY 31 2019

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** MG Squared 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:

Marcello Gutierrez Jr.  
Name of Person  
MG Squared LLC  
Firm/Company  
26439 Savage Circle  
Address  
Howey in the Hills, Florida 34737  
City/State and Zip Code  
marc.gutierrez10@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marcello Gutierrez Jr. 407 3428568  
at ( )  
Name of Person 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:

MG Squared 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:

26439 Savage Circle

Howey in the Hills, Florida

34737

Mailing Address:

26439 Savage Circle

Howey in the Hills, Florida

34737

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:

Marcello Gutierrez Jr.

Name

26439 Savage Circle

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

Howey in the Hills

Florida

34737

City

State

Zip

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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:**

Marcello Gutierrez Jr.

26439 Savage Circle

Howey in the Hills, Florida 34737

AMBR

Marcello Gutierrez Sr.

26439 Savage Circle

Howey in the Hills, Florida 34737

AMBR

Tamatha Gutierrez

26439 Savage Circle

Howey in the Hills, Florida 34737

(Use attachment if necessary)


**ARTICLE V:** Effective date, if other than the date of filing: June 1, 2019. (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.

Marcello Gutierrez Jr.

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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