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Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		— <del>— ;</del> — ;
	Division of Corporations	표 전 -
	Fax Number : (850)617-6381	
From:		
	Account Name : LAZARUS CORPORATE FILING SERVICE,	INC.
	Account Number : I28800000019	
	Phone : (305)552-5973 Fax Number : (305)675-5944	
	, ,	
anı	the email address for this business entity to be used nual report mailings. Enter only one email address ploads Address:	ease.**
anı	FLORIDA LIMITED LIABILITY CO.	I for future ease. **
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Corporate Filing Menu

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Electronic Filing Menu

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICUET	OTHER WALL
ARTICLE I - Name:	
The name of the Limited Liability Company	W.io.
MJJC Clear	ing Services, LLC
ARTICLE	Jervices, LLC
ARTICLE II - Address:	V
The mailing address and street address of the Company is:	ne principal office of the Limited Liability
14422 SW 22 te.	Mani, FL 33/75 &
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	int in
ARTICLE III - Registered Agent, Registered The name and the Florida street add	OPE .
The name and the Florida street address of the Company cannot serve as its own Registered Agent. You must des with an active Florida registration	Duce:
Company cannot serve as its own Registered Agent. You must des with an active Florida registration.)	ignate an individual as a rest
3	Ousiness enir)
Levia Salado	
14422 SW 22 ter	Mani, FL 33175.
ARTICLE IV	
The name and title of each person authorized Liability Company: (MGR or AMBR)	to manage and control the Limited
1-1415	
LEVIA SALADO	(AMBR)

## Required Signatures:

Signature of a member or 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.

LEVIA SALADO

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..

gistered Agent's Signature (REQUIRED)

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