

L21000106875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

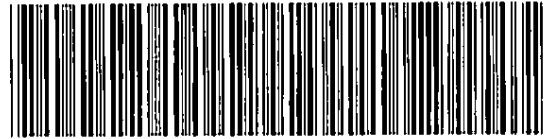
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



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2021 MAR 15 11:46

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 3/15 Glinda

**xx**      **CERTIFIED COPY**      (3 sets)

☐      **PHOTOCOPY**      \_\_\_\_\_

☐      **CUS**      \_\_\_\_\_

**xx**      **FILING**      LLC

1.      **CAS MX, LLC**  
          (CORPORATE NAME AND DOCUMENT #)
2.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
3.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
4.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
5.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)
6.      \_\_\_\_\_  
          (CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARTICLES OF ORGANIZATION

OF

CAS MX LLC,  
A Florida Limited Liability Company

The undersigned individual, being either a member or the authorized representative of a member, hereby presents these Articles of Organization to the Secretary of State of the State of Florida for the formation of a Limited Liability Company under the laws of the State of Florida.

ARTICLE I

The name of the Limited Liability Company is: CAS MX, LLC.

ARTICLE II

This Limited Liability Company is to exist in perpetuity. The existence of this Limited Liability Company shall commence on the date these Articles are filed with the Secretary of State of the State of Florida.

ARTICLE III

The name of the initial registered agent and the street address of the initial registered office are as follows:

Registered Agent

MAHA MOURAD

Address of Registered Office

9050 NW 27<sup>th</sup> Avenue  
Miami, Florida 33147

ARTICLE IV

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

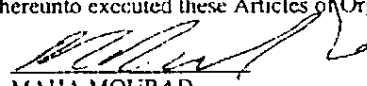
7900 NW 154 Street, Suite 202  
Miami Lakes, FL 33016

ARTICLE V

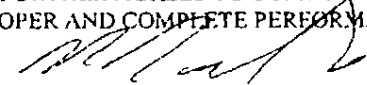
The street address of the principal office of this Limited Liability Company are both:

9050 NW 27<sup>th</sup> Avenue  
Miami, Florida 33147

IN WITNESS WHEREOF, I have hereunto executed these Articles of Organization this \_\_\_\_ day of March, 2021.

  
MAHA MOURAD  
AUTHORIZED REPRESENTATIVE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, THE UNDERSIGNED AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF HIS DUTIES.

  
MAHA MOURAD

Date

3-12-2021

2021 MAR 15 7:11:46