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2021 SEP 13 PM 3: 37

SECKETARY OF STATE
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE: 996200 8334108
AUTHORIZATION :
COST LIMIT : STILL OF MAN
ORDER DATE : September 13, 2021
ORDER TIME : 2:21 PM
ORDER NO. : 996200-005
CUSTOMER NO: 8334108
DOMESTIC FILING
NAME: CMM PRINTING LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker - EXT.
EXAMINER'S INITIALS:

COVER LETTER

	ew Filing Sec ivision of Cor					
SUBJECT	CMM Print	ing LLC				
SOBSECT	•	Name	of Limited	Liability	Company	
The enclos	ed Articles of	Organization and fe	c(s) are subi	mitted fo	r filing.	
Please retu	rn all correspo	ondence concerning	this matter to	o the foll	owing:	
	Kristina Hos	hovsky				
			Na	me of Pe	erson	
•	M Managem	ent, Inc.				
			Fir	rm/Comp	pany	
	215 Coles St	reet				
			-	Address	 -	
	Jersey City,	NJ 07310				
			City/St	ate and	Zip Code	
-	khoshovsky@	_	be used for fi	uture and	ual report notification	
Par Carbari					au report notificati	,
r or turther t	niormation co	ncerning this matter	, piease cair	i		
	Kristina Hosl	hovsky	201 _at (798-4710	
	Nam	e of Person	Area C	ode	Daytime Telephone	e Number
Enclosed is	s a check for t	he following amoun	ıt:			
	Filing Fee	□\$130.00 Filing Certificate of Sta	; Fee &	Certified	00 Filing Fee & Copy copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	ng Address			reet Address	
		iling Section			ew Filing Section Di he Centre of Tallaha	
		on of Corporations lox 6327			115 N. Monroe Stree	
Taliahassee, FL 32314				Tallahassee, FL 32303		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 SEP 13 PM 4: 14

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE ASSEE, FL

	IALLAH
CMM Printing LLC	
(Must conatin the words "Limited Liabil	ity 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:	Mailing Address:
3100 NW 7th Avenue, Miami, FL 33127	318 NW 23rd Street, Miami, FL 33127
	, <u> </u>
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registanother business entity with an active Florida registration.)	
The name and the Florida street address of the registered agen	et are:
Corporation Service Comp	pany
Nan	ne

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..

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

FL

State

Corporation Service Company

(Company Company Company

1201 Hays Street

City

Tallahassee

Registered Agent's Signature (REQUIRED)

32301

Zip

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Mark Queteles 3100 NW 7th Avenue, Miami, FL 33127	
MGR	Carlos Perez 3100 NW 7th Avenue, Miami, FL 33127	2021 SE SECRE
MBR	Moishe Mana 318 NW 23rd Street, Miami, FL 33127	P 13 PM 4: TARY OF ST AHASSEE, I
 		4: 14
(Use attachment if necessary)		
(If an effective date is listed, the date must be the date of filing.)	date of filing; Unon filine	orior to or 90 days after
REQUIRED SIGNATURE:	2 Smul	
This document is ex I am aware that any	a member or an authorized representative of a member accuted in accordance with section 605.0203 (1) (b). Flor false information submitted in a document to the Department for the Department of the Department for the Depart	ida Statutes.
	Mark Quetgles	_
-	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)