# L24000272996

(Req	uestor's Name)	
(Add	ress)	
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(City.	/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

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TO

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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Adios M&M LLC		
Please Debit FCA000000003	3 For: 125	
Thank you Seth Neeley		
Stall		Art of Inc. File
		LTD Partnership File
•		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		Dissolution / Withdrawal  Annual Report / Reinstatement
		Annual Report / Reinstatement
		Cert. Copy CO
		Photo Copy  Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
- 15 Caf		Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
		UCC 11 Search
Name Date	Time	UCC 11 Retrieval
Walk-In Will	Pick Up	Courier

And the second second

### COVER LETTER

TO:	lew Filing Section Division of Corporations	
CUDIE	Adios M&M LLC	
SUBJE	Name of Limited Liability Company	
The en	sed Articles of Organization and fee(s) are submitted for filing.	
Please	urn all correspondence concerning this matter to the following:	
	Michael Gulban	
	Name of Person	_
		_
	Firm/Company	
	925 Lake Wyman Road	_
	Address	
	Boca Raton, Florida 33431  City/State and Zip Code	_
	MGulban@cherryroad.com	
For furth	E-mail address: (to be used for future annual report notification)  nformation concerning this matter, please call:	
Enclose	Name of Person Area Code Daytime Telephone Number  s a check for the following amount:	
	iling Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	L. A	iaa MARMATIC			
(Must conta	ain the words "Limited	lios M&M LLC Liability Company, "	L.L.C.," or "LLC.")		-
`		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,		
ARTICLE II - Address: The mailing address and street ad	ddress of the principal c	office of the Limited L	iability Company is:		
Princip	al Office Address:		Mailing Add	race.	
Tincipa	ar Office Address.		<del></del>	11 C33	
925 Lake Wyman Ro			ake Wyman Road		_
Boca Raton, Florida	33431	Boca	Raton, Florida 33431		-
		Name  Lake Wyman Road s (P.O. Box <u>NOT</u> acc	oantable)		
	riorida street addres	is (P.O. Box <u>NOT</u> acc	ceptable)		
	Boca Raton	Florida	33431		
	City	State	Zip		
	gent and to accept serv	ice of process for the a	rbove stated limited liab		
Having been named as registered a place designated in this certificate, further agree to comply with the pro furthamiliar with and accept the ob-	I hereby accept the app ovisions of all statutes re	ointment as registered elating to the proper a as registered agent as DocuSigned by:	and complete performan provided for in Chapte	ice of my duties,	
place designated in this certificate, further agree to comply with the pro	I hereby accept the app ovisions of all statutes re	ointment as registered elating to the proper d as registered agent as	and complete performan provided for in Chapte	ice of my duties,	and I
place designated in this certificate, further agree to comply with the pro	I hereby accept the app povisions of all statutes re ligations of my position	ointment as registered elating to the proper a as registered agent as DocuSigned by:	ind complete performa provided for in Chapte	ice of my duties,	

ARTICLE IV-

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Bo	ca Raton, Florid	la 33432		
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ive date is listed, the date must be specific and can iling.) e date inserted in this block does not meet the applic nt's effective date on the Department of State's reco	cable statutory fi			
VI: Other provisions, if any				
VI: Other provisions, if any.				
	- DocuSigned by:			
EQUIRED SIGNATURE:	- •	kan.		£(£)
EQUIRED SIGNATURE:	— DocuSigned by:  Michael Gull  — DEBGGGGGGGGEGEGGG			
EOUIRED SIGNATURE:  Signature of a member or an ac	Michael Gull	esentative of	a member.	66.50
Signature of a member or an au This document is executed in accordan	Michael Gull  -0085C5004815E415  nuthorized reproduce with section	esentative of 605.0203 (1)	(b), Florida	Statutes.
EOUIRED SIGNATURE:  Signature of a member or an ac	Midual Gull  -088065004815E415  nuthorized represence with section submitted in a do	esentative of 605.0203 (1)	(b), Florida	Statutes.
Signature of a member or an au This document is executed in accordar I am aware that any false information s constitutes a third degree felony as pro-	Midual Gull  -088065004815E415  nuthorized represence with section submitted in a do	esentative of 605.0203 (1)	(b), Florida	Statutes.

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)