

L04000001973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

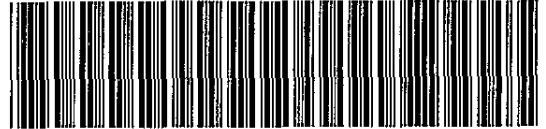
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

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TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- 1. PICK-A-GIFT L.L.C.
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

- Walk in Pick up time 2.00 Certified Copy
- Mail out Will wait Photocopy Certificate of Status

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|-----------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

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

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ARTICLE I- Name:

The name of the Limited Liability Company is:

PICK-A-GIFT L.L.C.

ARTICLE II- Address

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

Principal Office Address:

Bernardo Gabriel Gelbspan
19443 NE 17 Avenue
North Miami Beach-Fl 33179

Carlos Arturo Monastirsky
19654 E. Country Club Dr.
Aventura-Fl.33180

Adolfo Sergio Rascovsky
20291 NE 30 Avenue #105
Aventura-Fl.33180

Mailing Address:

19443 NE 17 Avenue
North Miami Beach-Fl. 33179

19654 E. Country Club Dr.
Aventura-Fl.33180

20291 NE 30 Avenue #105
Aventura-Fl.33180

ARTICLE III-Registered agent, Registered Office, & Registered Agent's Signature:

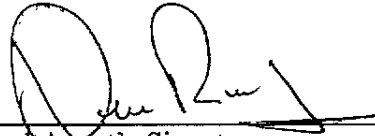
The name and the Florida street of the registered agent are:

Adolfo Rascovsky
Name

20291 NE 30 Avenue-Aventura Fl. #105

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

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 608, Florida Statutes..



Registered Agent's Signature

ARTICLE IV- Manager(s) or managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address

"MGR"- Manager
"MGRM"- Managing Member

MGRM

Adolfo S. Rascovsky
20291 NE 30 Avenue #105
Aventura-Fl. 33180


MGR

Carlos Arturo Monastirsky
19654 E. Country Club Dr.
Aventura-Fl.33180

MGR

Carlos Arturo Monastirsky
19654 E. Country Club Dr.
Aventura-Fl.33180

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Adolfo Sergio Rascovsky

Typed or printed name of signee