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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 Phone : (215)563-8113

Fax Number : (215) 977-9386

07 HAR -8" PM 12: 3

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED
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ECHEMAN OF STATE

bijoux holdings llc

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

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ARTICLE I - Name:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp	any is:	•
BIJOUX	HOLDINGS LLC	
(Must end with the words "Limited Liability Company	, "Limited Company" or their abbreviation "LLC," or "LC.,	.
ARTICLE II - Address;		
The mailing address and street address of	f the principal office of the Limited Liability (Company is:
Principal Office Address:	Mailing Address:	. 413.1921.htm. 15. 15.125.1924.1
4201 NORTH WASHINGTON BOULEVARD	4223 FAIRFAX DRIVE EAST	and the second of the second o
SARASOTA, FL 34234	BRADENTON, FL 34203	The State of the
	istered Office, & Registered Agent's Signat on Registered Agent. You must designate an individual or an	
The name and the Florida street address of	of the registered agent are:	VISION LINE
WILLIAM SHEHWEN JR		友 表質
•	Name	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
4201 NORTH WASHING	TON BOULEVARD	PH I2
Florida st	reet address (P.O. Box NOT acceptable)	25 SE

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, F.S..

City, State, and Zip

34234

SARASOTA

Registered Agent's Signature (REQUIRED) (CONTINUED) Page 1 of 2

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

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

TUR L	CDM	1	NAME LAND OF THE MARCHE TO	
MGRM		,	WILLIAM SHEHWEN, JR. 4201 NORTH WASHINGTON BOULEVARD	-
			SARASOTA, FL 34234	-
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(U	se attachment if r	necessary)		MAR.
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		e, if other than the date I, the date must be spe	ecific and cannot be more than five business	13 " 277
	ys after the date			
				: 5 0

Signature of a member or an authorized representative of a member.

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

WILLIAM SHEHWEN, JR. , MANAGING MEMBER

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)

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