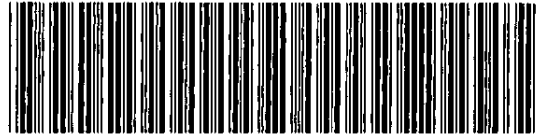


L08000068507



700129913227

06/02/08--01021--008 **125.00

(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

FILED
08 JUL 15 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article 8001

T. HAMPTON

JUL 16 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KALLISTAL HOLDING CORPORATION LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ERIC AMSALLEM
(Name of Person)

ERIC AMSALLEM LLC
(Firm/Company)

16485 COLLINS AV #935
(Address)

SUNNY ISLES BEACH FL 33160
(City/State and Zip Code)

For further information concerning this matter, please call:

ERIC AMSALLEM at (786) 785-1374
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 JUL 15 PM 1:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 3, 2008

ERIC AMSALLEM
16485 COLLINS AVE
935
SUNNY ISLES BEACH, FL 33160

SUBJECT: KALLISTAL HOLDING CORPORATION LLC
Ref. Number: W08000027106

We have received your document for KALLISTAL HOLDING CORPORATION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORPORATION." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 408A00034558

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KALLISTAL HOLDING LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

16485 COLLINS AV #935
SUNNY ISLES BEACH FL 33160

16485 COLLINS AV #935
SUNNY ISLES BEACH FL 33160

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

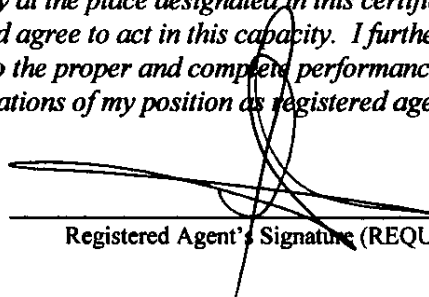
ERIC AMSALLEM
Name

16485 COLLINS AV #935
Florida street address (P.O. Box **NOT** acceptable)

SUNNY ISLES BEACH FL 33160
City, State, and Zip

FILED
08 JUL 15 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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..



Registered Agent's Signature (REQUIRED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

LES JARDINS D'ARCADIE
2 ROUTE DE VILLE
20200 BASTIA FRANCE

MGRM

ALAIN FALCUCCI
LES JARDINS EN VILLE
20200 VILLE DI PIETRABUGNO FRANCE

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

ERIC AMSALLEM

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)

FILED
08 JUL 15 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA