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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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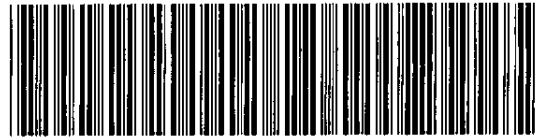
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR  
SEP - 2 2009  
EXAMINER

**CAPITAL CONNECTION, INC.**

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

15th Street Cut  
Rote Liquors LLC

- 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 \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

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Signature \_\_\_\_\_

Requested by: Seth 9/2 11:00

Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
15TH STREET CUT RATE LIQUORS LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby make, acknowledge, and file the following Articles of Organization.

**ARTICLE I – NAME**

The name of this limited liability company (hereinafter referred to as the "Company") shall be: **15TH STREET CUT RATE LIQUORS LLC**

**ARTICLE II – ADDRESS**

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

**3128 Smitter Road  
Tampa, Florida 33618**

**ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE**

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

**Ida Gonzalez  
3128 Smitter Road  
Tampa, Florida 33618**

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**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, Florida Statutes.

  
\_\_\_\_\_  
**IDA GONZALEZ**  
Registered Agent

**ARTICLE IV – COMPANY MANAGEMENT**

This Company is to be managed by the operating manager and is, therefore, a manager-managed company. Company matters shall be decided by unanimous vote.

The initial Operating Manager shall be: **Ida Gonzalez**

**ARTICLE V- BUSINESS PURPOSE**

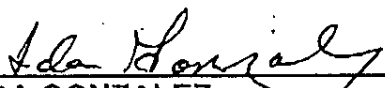
The primary business purpose of this Company is the operation of a cut rate liquor store at 3312 15<sup>th</sup> St., Tampa, FL, in addition to any other purposes permitted under Florida law.

**ARTICLE VI – EFFECTIVE DATE**

The effective date of this Company shall be the date of the filing of these articles with the Secretary of State of Florida.

In accordance with §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.

Dated: September 1, 2009.

  
\_\_\_\_\_  
IDA GONZALEZ  
Operating Manager