

L10000088466

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000188859 3)))



H100001888593ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC
Account Number : I2C070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 AUG 23 AM 8:14
FILED

**Enter the email address for this business entity to be used for the annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
10 AUG 23 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
Caribe Worxs International, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

D. BRUCE

AUG 24 2010

EXAMINER

7-10000188859.3

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

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

CARIBE WORXS INTERNATIONAL, LLC

ARTICLE II ADDRESS

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

2620 SW 123RD COURT
MIAMI, FLORIDA 33175

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent

ALIX DOUYON
2620 SW 123RD COURT
MIAMI, FLORIDA 33175

FILED
10 AUG 23 AM 8:43
REGISTERED AGENT
ALLAHABAD
FLORIDA

Having been named as registered agent 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.

X 

ALIX DOUYON / Registered Agent's signature

7-10000188859.3

#10000188859-3

PAGE 2 CARIBE WORXS INTERNATIONAL, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

ALIX DOUYON

2620 SW 123RD COURT

MIAMI, FLORIDA 33175

MANAGING MEMBER


FRANCOISE CHAM

2620 SW 123RD COURT

MIAMI, FLORIDA 33175

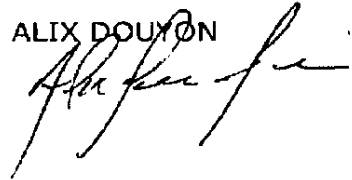
FILED
10 AUG 23 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

.....

X 

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.

ALIX DOUYON



#10000188859-3