# L1 4594

(Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



700185838917

10/07/10--01001--013 \*\*125.00

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE: FLORIDA

RECEIVED

B. KOHR

OCT - 7 2010

EXAMINER



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

	<b></b>		_	
OROPRIME, LLC				
			1	
			-	
	·			
				Art of Inc. File
<del></del>				LTD Partnership File
				Foreign Corp. File
			1	L.C. File
				Fictitious Name File
				Trade/Service Mark
			\	Merger File
			<b>—</b>	Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			<u>✓</u>	Photo Copy
			<u> </u>	Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
Ū				Vehicle Search
	· — — — ·			Driving Record
Requested by: SETH	10/06/10	3:00		UCC 1 or 3 File
Name	Date	Time	—	UCC 11 Search
				UCC 11 Retrieval
Walk-In	Will Pick Up	<del></del>		Courier

#### ARTICLES OF ORGANIZATION

**OF** 

#### OROPRIME, LLC

ARTICLE ! NAME

The name of this limited liability company is Oroprime, LLC.

ARTICLE II DURATION

This limited liability company shall have perpetual existence.

ARTICLE III PURPOSE

This limited liability company is organized for any lawful purpose, except that special statutes for the regulation and control of specific types of business shall control when in conflict with these Articles of Organization.

## ARTICLE IV ADDRESS

The principal place of business and mailing address of this limited liability company shall be 1351 Sawgrass Corporate Parkway, Sunrise, Florida 33323.

## ARTICLE V INITIAL REGISTERED AGENT AND OFFICE

The initial registered agent of this limited liability company is Paul Nudelman, and the initial registered agent's office address shall be 1351 Sawgrass Corporate Parkway, Sunrise, Florida 33323.

#### ARTICLE VI MANAGEMENT

This limited liability company shall be managed one or more managers. The name and address of the initial managers are:

Paul Nudelman 1351 Sawgrass Corporate Parkway, Sunrise, FL 33323

Norma Nudelman 1351 Sawgrass Corporate Parkway, Sunrise, FL 33323

Joseph Nudelman 1351 Sawgrass Corporate Parkway, Sunrise, FL 33323

ARTICLE VII POWERS

This limited liability company shall have all of the powers enumerated in the Limited Liability Act.

## ARTICLE VIII RIGHT OF CONTINUANCE

The members shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event that terminates the continued membership of a member in the limited liability company.

### ARTICLE IX AMENDMENT

These Articles of Organization may be amended in the manner provided in the Operating Agreement of the Company.

IN WITNESS WHEREOF, a member of the limited liability company has executed these Articles of Organization on the 6<sup>th</sup> day of October, 2010, and affirms under the penalties of perjury that the facts contained in these Articles of Organization are true to the best of his/her knowledge.

Paul Nudelman, Member

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

Oroprime, LLC

2. The name and address of the registered agent and office is:

Paul Nudelman 1351 Sawgrass Corporate Parkway Sunrise, Florida 33323

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.

Paul Nudelman

Date: October 6, 2010