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FLORIDA LIMITED LIABILITY CO.  
Christobell Designs, LLC

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EXAMINER

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

In compliance with Chapter 608, F.S.

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**ARTICLE I NAME**

The name of the Limited Liability Company is:

CHRISTOBELL DESIGNS, LLC

**ARTICLE II ADDRESS**

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

931 VILLAGE BOULEVARD, STE 905-92  
WEST PALM BEACH, FLORIDA 33409

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

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

LESLENE SHARPE  
931 VILLAGE BOULEVARD, STE 905-92  
WEST PALM BEACH, FLORIDA 33409

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   
\_\_\_\_\_  
LESLENE SHARPE / Registered Agent's signature

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PAGE 2 CHRISTOBELL DESIGNS, LLC

**ARTICLE IV MANAGEMENT**

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

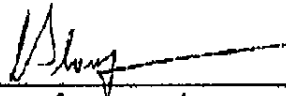
**ARTICLE V MEMBERS (one(ones))**

MANAGING MEMBER  
LESLENE SHARPE  
931 VILLAGE BOULEVARD, STE 905-92  
WEST PALM BEACH, FLORIDA 33409

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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.

LESLENE SHARPE

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