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ACCOUNT NO. : I2000000195 REFERENCE: 312435 5015497 AUTHORIZATION : ORDER DATE: September 24, 2014 ORDER TIME : 10:26 AM ORDER NO. : 312435-005 CUSTOMER NO: 5015497 DOMESTIC FILING NAME: U.S. RETAIL STORES HIALEAH LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ___ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Courtney Williams - EXT. 62935 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITTED LIABILITY COMPANY

<u>,,</u>	, charting the	OKTIONIN IZMITEDIZABE	211 COMPAN	
ARTICLE 1 - Name:				
The name of the Limited Liabil	ty Company is:			
U.S. RETAIL STORES HIAL				
(Must end	with the words "Lin	nited Liability Company, "L.L.(C" or "LLC.")	
ARTICLE II - Address:				
The mailing address and street a	ddress of the princip	pal office of the Limited Liabili	ity Company is:	
Principal Office Address:	<u>4</u> .	failing Address:	5). 2	
1400 Broadway		1400 Broadway		
New York, NY 10018		New York, NY 1001	8 3 5 5 5	•
ARTICLE III - Registered Ag	ent. Registered Off	ire & Registered Apent's Sig	<i>Θ</i> 6 0 1	i
The Limited Liability Company	cannot serve as its	own Registered Agent. You mu	ust designate an individual or	į
another business entity with an	active Florida registi	ration.)	· · · ·	1
The name and the Florida street	address of the regist	ered agent are:	97 :8	
Comor	ation Service Com	nanv	. ' 60	
<u></u>		ame		
1201 H	ays Street			
Florida	street address (P.O.	Box NOT acceptable)	_	
Tallah	assee	_{FL} 32301		
	.City	Zip		
Hening hour named as registers	id'ogani and to occei	nt versice of process for the above	ve stated limited liability company at	
			ered agent and agree to act in this	
			e proper and complete performance	
oj my Auties, ana i am jamilio		e.obtigations of my position as r Chapter 605, F.S.	registered agent as provided for in	
Согра	oration Service C			
By:	Daen S. Ha	well don't U.P.		
 R	egistered Agent's S	ignature (REQUIRED)		
	oreen S. Haeselii	n, Asst. VP		
	(CONT)	INUED)		

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	U.S. Retail Stores LLC
•	1400 Broadway
	New York, NY 10018
,	
	(C)
	-
•	* .
(Use attachment if necessary) EV: Effective date, if other than the dective date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the d	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the dective date is listed, the date must be filling.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dictive date is listed, the date must be f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the dective date is listed, the date must be f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	lef and cannot be more than five business days prior to or 90
E V: Effective date, if other than the dective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a 1 (In accordance with section	nember or an authorized representative of a member.
E V: Effective date, if other than the dective date is listed, the date must be filling.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a 1 (In accordance with section constitutes an affirmation)	nember or an authorized representative of a member. in 605.0203 (1) (b) Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true.
E V: Effective date, if other than the decive date is listed, the date must be filling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a 1 (In accordance with section constitutes an affirmation 1 am aware that any false	nember or an authorized representative of a member.
E V: Effective date, if other than the decive date is listed, the date must be filling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a 1 (In accordance with section constitutes an affirmation 1 am aware that any false	member or an authorized representative of a member. in 605.0203 (1) (b) Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State felony as provided for in s.817.155. F.S.)
E V: Effective date, if other than the decive date is listed, the date must be filling.) E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a 1 (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree	nember or an authorized representative of a member. in 605.0203 (1) (b). Florida Statutes, the execution of this document a under the penalties of perjury that the facts stated herein are true, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)

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