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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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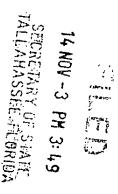
Office Use Only



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J. Shivers NOV 0 3 2014



COVER LETTER

Division of C	Section Corporations		
SUBJECT:		/ING MEDIA. L.L.C mited Liability Company	
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corre	spondence concerning this m	natter to the following:	
JILLENE	DOOLKADIR, ESQ.	Name of Person	
ם און	DIR I AM/ R A		
DOOLKA	DIR LAW, P.A.	Firm/Company	······
2000 N. S	STATE RD. 7 SUITE 215	Address	
MARGAT	E, FL 33063	City/State and Zip Code	
JDOOLKADIR@	DUADLAWYERS COM	d for future annual report notifica	ation)
For further information	n concerning this matter, ple	ase call:	
JILLENE DOOLKAD Nam	DIR. ESQ at (1) at (1) at (1)		lephone Number
Enclosed is a check fo	r the following amount:		
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ling Address stration Section	Street/Courier Add Registration Section	ress

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	LUXURY LIVING N	MEDIA I.I.C
(M		ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address	:	
		al office of the Limited Liability Company is:
Principal Office Addre	ess:	Mailing Address:
2580 SOUTHWEST 1	14 AVENUE	2580 SOUTHWEST 114 AVENUE
MIAMI, FL 33165 ARTICLE III - Registe	ered Agent, Registered Off	ice, & Registered Agent's Signature:
MIAMI, FL 33165 ARTICLE III - Registe (The Limited Liability C	ered Agent, Registered Off	ice, & Registered Agent's Signature: own Registered Agent. You must designate an individua
ARTICLE III - Registe (The Limited Liability Canother business entity	ered Agent, Registered Off	ice, & Registered Agent's Signature: own Registered Agent. You must designate an individuation.)
ARTICLE III - Registe (The Limited Liability Canother business entity	ered Agent, Registered Off Company cannot serve as its with an active Florida registr	ice, & Registered Agent's Signature: own Registered Agent. You must designate an individuation.) cred agent are:
ARTICLE III - Registe (The Limited Liability Canother business entity	ered Agent, Registered Off Company cannot serve as its with an active Florida regist a street address of the regist	ice, & Registered Agent's Signature: own Registered Agent. You must designate an individuation.) cred agent are:
ARTICLE III - Registe (The Limited Liability Canother business entity) The name and the Florid	ered Agent, Registered Off Company cannot serve as its with an active Florida regist a street address of the regist	ice, & Registered Agent's Signature: Dwn Registered Agent. You must designate an individuation.) ered agent are: RLAW, P.A. ame
ARTICLE III - Registe (The Limited Liability Canother business entity) The name and the Florid	ered Agent, Registered Off Company cannot serve as its with an active Florida regist a street address of the regist DOOLKADI	ice, & Registered Agent's Signature: Dwn Registered Agent. You must designate an individuation.) Ered agent are: RLAW, P.A ame
MIAMI, FL 33165 ARTICLE III - Registe (The Limited Liability Canother business entity) The name and the Florid	ered Agent, Registered Off Company cannot serve as its owith an active Florida regist la street address of the regist DOOLKADI N	ice, & Registered Agent's Signature: Dwn Registered Agent. You must designate an individuation.) Ered agent are: RLAW, P.A ame

ny at น่ร ınce of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in

Chapter 605, E.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" - Authorized Member "MGR" = Manager	Name and Address:	
MGR.	KEVIN JOVANNI ARAUJO 2580 SOUTHWEST 114 AVENUE MIAMI, FL 33165	
 		
(Use attachment if necessary)		
LE V: Effective date, if other than the date of fective date is listed, the date must be spe	of filing: (OPTIONAL) cific and cannot be more than five business days prior to	or 90 days after
LE V: Effective date, if other than the date of fective date is listed, the date must be spen of filling.)	of filing: (OPTIONAL) effic and cannot be more than five business days prior to	or 90 days after
LE V: Effective date, if other than the date of fective date is listed, the date must be spen of filling.)	of filing: (OPTIONAL) cific and cannot be more than five business days prior to	or 90 days after
LE V: Effective date, if other than the date offective date is listed, the date must be spend of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE:	cific and cannot be more than five business days prior to	or 90 days after
CLE V: Effective date, if other than the date of flective date is listed, the date must be specie of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any fulse inform	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document to submitted in a document to the Department of State of a sprovided for in s.817.155, F.S.)	or 90 days after
CLE V: Effective date, if other than the date of flective date is listed, the date must be specie of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men (In accordance with section 605 constitutes an affirmation under I am aware that any fulse inform	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true nation submitted in a document to the Department of State of as provided for in s.817.155, F.S.) KEVIN ARALJO	e or 90 days after
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