Sonya Milord 2139 NW 94 St. Miami, FL 33147 City/State/Zip Phone #			17-71		-
CORPORATION NAME(S) & DOCUME 1. 00789-00423-0047	ENT		fficesé Only nown):		
(Corporation Name) 2(Corporation Name)		(Document #)	14AT-950	30	
(Corporation Name) 4(Corporation Name)		(Document #)	00004044 -04/23/010	3867 01122012 ****155.00	
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait		Photocopy	Certified CopyCertificate of State	atus	
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other		ENDMENTS Amendment Resignation of R.A., Change of Registere Dissolution/Withdra Merger	d Agent _ 설득	AFTHOVED OR JAN 16 PM 3:	
OTHER FILINGS	RE	GISTRATION/QUA	LIFICATION		
☐ Annual Report ☐ Fictitious Name		Foreign Limited Partnership Reinstatement Trademark Other	-		-
			To-	JO. OU	٦

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 27, 2001

SONYA MILORD 2139 NW 94 ST. MIAMI, FL 33147

SUBJECT: TAJIRI VENTURES, LLC

Ref. Number: W01000009536

We have received your document for TAJIRI VENTURES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 701A00024986

02 JAN 16 PM 3: 18

FILED SI

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
Tajiri Ventures, LLC			
ARTICLE II - Address:			
The mailing address and street address of the principal office of the Limited Liability C	Company	is:	
12700 NW First Avenue, Miami, FL 3316	8		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signat			
The name and the Florida street address of the registered agent are:			
Wesner Milord		• .	

745 NW 60 Street, Unit 4			
Florida street address (P.O. Box NOT acceptable)			
Miami FL 33127			
City, State, and Zip			yr gari
Having been named as registered agent and to accept service of process for the above stable liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 608, Registered Agent's Signature	ent as visions oj	£ ~11	
Article IV - Management (Check box if applicable.)			
The Limited Liability Company is to be managed by one manager or more managed	ere and ic		
therefore, a manager - managed company.	45 and 15,	,	
(An additional article must be added if an effective date is requested)			
IM: Par I	₹00	Ξ	
Signature of a member or an authorized representative of a member.		124	<u> </u>
(In accordance with section 608.408(3), Florida Statutes, the execution	翌		
of this document constitutes an affirmation under the penalties of perium		9	面名
that the facts stated herein are true.)	# <u>"</u> ⊊	2	O E
Sonya Milord		ديب	ئي
Typed or printed name of signee		3	· · · · · · · · · · · · · · · · · · ·
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Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)