

L050000039016

Florida Department of State
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TALLAHASSEE, FLORIDA

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

best luxury tour & limo, llc

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**ARTICLES OF ORGANIZATION
OF**

FILED

A Florida Limited Liability Company

2005 MAR 31 A 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I-NAME

The name of the Limited Liability Company is:

BEST LUXURY TOUR & LIMO, LLC

ARTICLE II-ADDRESS:

The mailing address and street address of the principle office of the Limited Liability company is:

PRINCIPAL OFFICE ADDRESS:

MAILING ADDRESS:

**222 189 STREET
SUNNY ISLES FLA 33160**

**222 189 STREET
SUNNY ISLES FLA 33160**

ARTICLE III- REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE:

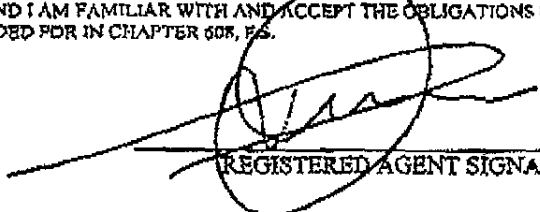
The name and the Florida street address of the registered agent are:

JAMAL HIDMI
(NAME)

222 189 STREET
FLORIDA STREET ADDRESS(P.O BOX NOT ACCEPTABLE)

MIAMI FLA 33160
CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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.


REGISTERED AGENT SIGNATURE

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ARTICLE IV-MANAGEMENT/MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows: 05 MAR 31 A 11:08

Title:

Name and address:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGR= Manager

MGRM= Managing Member

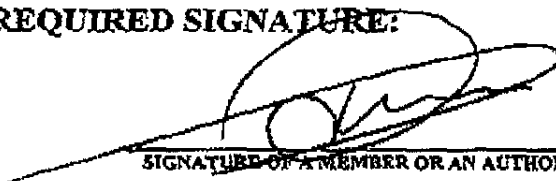
MGR= JAMAL HIDMI

222 189 STREET SUNNY ISLES FLA 33160

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



SIGNATURE OF A MEMBER OR AN AUTHORIZED REPRESENTATIVE OF A MEMBER.

(In accordance with section 688.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JAMAL HIDMI

Typed or printed name of signee

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