

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 : (305)634-3694 Phone

Fax Number : (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

north armenia holdings, llc

Certificate of Status	· · · · · · · · · · · · · · · · · · ·	0
Certified Copy	!	1
Page Count		03
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Corporate Filing Menu

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October 24, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE CORPORATE KIT

SUBJECT: NORTH ARMENIA HOLDINGS, LLC

REF: W08000048906

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Agnes Lunt Regulatory Specialist II FAX Aud. #: H08000242069 Letter Number: 808A00054955

P.O BOX 6327 - Tallahassee, Florida 32314

10/54/5008 15:30 3020330000 EMBIRE CORP KIT

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: NORTH ARMENIA HOLDINGS, LLC (Must end with the words "Limited Liability Company, "L.L.C." or "LLC.") (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:

P.O. BOX 331717

MIAMI, FLORIDA 33233

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

999 BRICKELL AVENUE

MIAMI, FLORIDA 33131

SUITE 401

DAVID GREEK
Name
999 BRICKELL AVENUE SUITE 401
Florida street address (P.O. Box NOT acceptable)
MIAMI _{FL} 33131
City, State, and Zip

Having been named as registered agent and 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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EMPIRE CORP KIT

MGRM	PINK CAT, LLC P.O. BOX 331717	
	MIAMI, FLORIDA 33233	
MGRM	DALI INVESTMENTS, L.L.C.	PECHETARY
	P.O. BOX 331717	
	MIAMI, FLORIDA 33233	\mathbb{Z}
MGRM	NORWOOD INVESTMENTS ONE, LLC	
	92 ROYAL PALM DRIVE	₩ 3
	FT.LAUDERDALE, FL 33301	<u> </u>
	Ön	52 -
/II		
(Use attachment if necessary)		
LE V: Effective date, if other than fective date is listed, the date mu days after the date of filing.)	the date of filing: (OPT st be specific and cannot be more than five business	IONAL) ss days [

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

PINK CAT, LLC AS MANAGING MEMBER BY: DAVID GREER, ITS MANAGING MEMBER

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

\$ 5.00 Certificate of Status (Optional)

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