## Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)541-3694

Fax Number : (305)541-3770

## LIMITED LIABILITY COMPANY

ulisse, llc

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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10/25/00 3:04 PM

## $\Pi U U U U U U U V O Z I V$

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: ULISSE, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

2262 500 22 Tevace mone, Fr. 33145

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Florida street address (P.O. Box NOT supertable)

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 agreeisted agent as provided for in Chapter 608, F.S...

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is,

therefore, a manager-managed company.

Wicola Maria Viste

(An additional article must be added to the offective date is requested)

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 penaltics of perjury that the facts stated herein are true.)

Kalph & tofinis
Typed or printed name of signes

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FILING FEES: s 100.00 Filing For for Articles of Organization

5 25.00 Designation of Registered Agent 5 30.00 Certified Copy (OUTIONAL)

5 5.00 Coreficate of Status (OPTIONAL)

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