

L000000013098

DAVID H. CHARLIP, P.A.
600 South Andrews Avenue
Colonial Bank Building - 6th Floor
Fort Lauderdale, Florida 33301
Telephone: (954) 467-8801
Fax: (954) 761-2301

October 20, 2000

Division of Corporations
SECRETARY OF STATE
Post Office Box 6327
Tallahassee, Florida 32314

Re: COMACO, L.L.C.

300003435789--8
-10/23/00--01121--016
****160.00 ****160.00

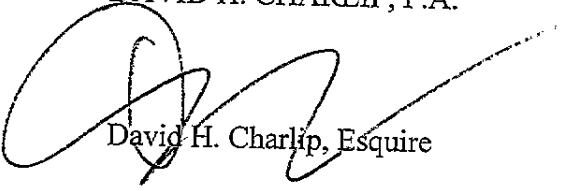
Dear Sir:

Enclosed please find an original and one (1) copy of the Articles of Organization/Affidavit of Membership and Contributions for the above-named limited liability company. Kindly file the original and return to the undersigned the original containing the filing information. Also enclosed is my check in the amount of \$160.00 for your filing fee and for a Certificate of Status.

Should you have any questions, please do not hesitate to contact the undersigned.

Very truly yours,

DAVID H. CHARLIP, P.A.


David H. Charlip, Esquire

FILED
NO OCT 23 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DHC/msc
Enclosure(s)
cc: client

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L00-13098
JR

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: **COMACO, L.L.C.**

ARTICLE II - Address:

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

18514 W. Dixie Hwy.
Miami, Fl. 33180

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

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

David H. Charlip, Esquire
Name
600 S. Andrews Ave. 6th Fl.
Florida street address (P.O. Box **NOT** acceptable)
Ft. Lauderdale, Fl. 33301
City, State, and Zip

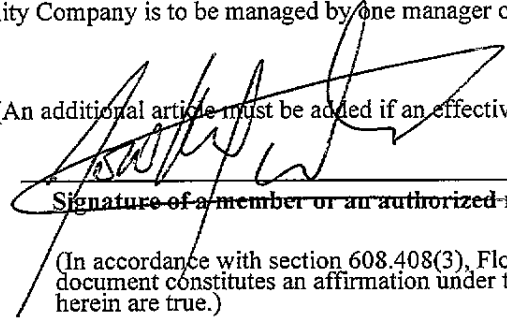
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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..


David H. Charlip, Esquire (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.

(An additional article must be added if an effective 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 penalties of perjury that the facts stated herein are true.)

PICASSO CLOTHING CARE, INC. - Jose Diaz, President

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)

FILED
NO OCT 23 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA