

Name Reservation

Reinstatement

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

824894/12500U

December 4, 2000

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

) .	Indochine	WIENI NUMBER (S):	
Filing Evidence ☑ Plain/Confirmation Copy		Type of Docum ☐ Certificate of Sta	
□ Certified Copy		□ Certificate of Go	ood Standing
		□ Articles Only	
	Retrieval Request □ Photocopy □ Certified Copy	Articles & Amer Fictitious Name	
	NEW FILINGS	AMENDMENTS]
	Profit	Amendment	<u>-</u>
	Non Profit	Resignation of RA Officer/Director	
X	Limited Liability	Change of Registered Agent	
	Domestication	Dissolution/Withdrawal	00 DEC SECRET
	Other	Merger	AFER A
			ARY C
	OTHER FILINGS	REGISTRATION/QUALIFICATION	OF STAN
	Annual Reports	Foreign	
	Fictitious Name	Limited Liability	ASSOCIATION AND AND AND AND AND AND AND AND AND AN

Reinstatement

Trademark

Other



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 4, 2000

UCC FILING & SEARCH SERVICES

SUBJECT: INDOCHINE IMPORTS L.L.C.

Ref. Number: W00000028541

We have received your document for INDOCHINE IMPORTS L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

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) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 700A00061380

FILED

00 DEC -5 PM 2: 40
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Indochine Imports L.L.C.

ARTICLE II - Address:

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

702 Cluff Ave., Altamonte Springs, FL 32701

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

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

NRAI Services, Inc.	
526 E. Park Avenue	-
Florida street address (P.O. Box NOT acceptable) Tallahassee FL 32301	-
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..

NRAI Şérviçes, Ing 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 ective 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.)

Mark H. Schaeffer, Start A Business.com

Typed or printed name of signee

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)