



L01000008020

ACCOUNT NO. : 072100000032

REFERENCE : 153577 7272107

AUTHORIZATION :

Patricia Pigatto

COST LIMIT : \$ 125.00

ORDER DATE : May 17, 2001

ORDER TIME : 3:41 PM

ORDER NO. : 153577-005

CUSTOMER NO.: 7272107

CUSTOMER: Ms. Maud-emille Simeon
Ms. Maud-emille Simeon

100004274141--2

20009 Nw 58 Court

Hialeah, FL 33015

DOMESTIC FILING

NAME:

FRERE AND SOEUR CREATIONS, LLC

EFFECTIVE DATE:

XX

ARTICLES OF INCORPORATION

CERTIFICATE OF LIMITED PARTNERSHIP

ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sandra Mathis - EXT. 1165

EXAMINER'S INITIALS:

VB
5-21-01

01 MAY 21 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FRERE AND SOEUR CREATIONS, LLC

ARTICLE II - Address:

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

20009 NORTHWEST 58TH COURT, MIAMI LAKES, FLORIDA 33015

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

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

Corporation Service Company
Name
1201 Hays Street
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..

Corporation Service Company

By: Laura R. Dunlap

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)

Laura R. Dunlap
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.)

Laura R. Dunlap

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)

APPROVED
AND
FILED
01 MAY 21 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY -17 01 (THU) 16:06

CSC TALL

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of FRERE AND SOEUR CREATIONS, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this day of

Maud Emille Simeon
Signature

Maud Emille Simeon
Print Name of Signer

WITNESS:

[Signature]
Signature

Maria Bustos
Print Name of Witness

WITNESS:

[Signature]
Signature

Ana Rodriguez
Print Name of Witness

01 MAY 21 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

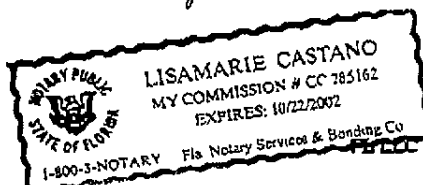
APPROVED
AND
FILED

State of Florida
County of Dade

Sworn to and subscribed before me this 18th day of May
2001 by Maud Emille Simeon.

My Commission Expires:

[Signature]
Notary Public



FILED - LIMITED POWER OF ATTORNEY 04/00 (ELLICATT)

LOCATION:

RX TIME 05/18 '01 15:13