

Florida Department of State

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

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000082762 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

Fax Number

: (305)634-3694

: (305) 533-9696

LIMITED LIABILITY COMPANY

YOUR PERSONAL JEWELER, LLC

Contraction of the contraction o	Koongorssanson
Ceruncate of Status	0
Certified Copy	
A STATE OF THE PROPERTY OF THE	1
Page Count	no .
Estimated Charge	
31	\$155.00

0100008276**2**



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

Your Personal Jeweler, LLC

ARTICLE II - Address

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

c/o Steven Dorfman 14 N.E. First Avenue, #1505 Miami, FL 33132

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Stephen C. Enriquez Name 9 West Flagler Street, Suite 600 Florida street address

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 dulps, and I am familiar with and accept the obligations of my position as registered agent as provided for provided for the provided for the control of the provided for the control of the provided for the provisions of all statutes relating to the proper and complete performance of my dulps, and I am familiar with and accept the obligations of my position as registered agent as provided for the proper and complete performance of the proper and the provisions of the proper and the proper and the provision of the proper and the proper and the provision of the proper and the proper and the provision of the provision

<u>Mizmi, Florida 33130</u> City, State, and Zip

Mered Agent's Signature

ARTICLE IV - Management (Check only if applicable).

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. The initial manager is:

> Steven Dorfman 14 N.E. First Avenue, #1505 Miami, FL 33132

(An additional article is the added if an effective date is required).

Signature of a mem an authorized representative of a member.

(In accordance with Section 608.408(3), Florida Status, the execution of this document constitutes an affirmation under the penalties of penjury that the facts stated herein are true).

> Stocken C. Euriquez Typed or printed name of signee