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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : A. BERNARD BOOKKEEPING & TAX SERVICE, INC.
Account Number : 071162000147
Phone : (305) 251-4591
Fax Number : (305) 251-1975

LIMITED LIABILITY COMPANY

GEMINI TRNDS ENTERPRISES, LLC.

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is GEMINI TRNDS ENTERPRISES, LLC

ARTICLE II - ADDRESS

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

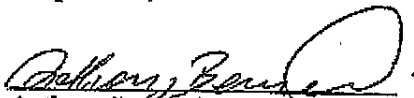
9032 SW 152ND STREET
MIAMI, FLORIDA 33157

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

| | |
|----------------|----------------------------------|
| Name | Anthony Bernard |
| Address | 9032 Sw 152 nd Street |
| City/State/Zip | Miami, Florida 33157 |

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 appointments 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.


Anthony Bernard-Registered Agent

ARTICLE IV- MANAGEMENT

The limited liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.


ANTHONY BERNARD

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.

ARTICLE V- MEMBERS

Anthony Bernard
9032 Sw 152nd Street
Miami, Florida 33157

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is: GEMINI TRNDS ENTERPRISES, LLC
2. The name and the Florida Street address of the registered agent and office are:

Anthony Bernard
9032 Sw 152nd Street
Miami, Florida 33157

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 appointments 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 obligation of my position as registered agent as provided for in Chapter 608, F.S.


Anthony Bernard - Registered Agent

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