

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

4/

FILED
May 09, 2005 8:00 am
Secretary of State

04-13-2005 90211 020 ****50.00

DOCUMENT # L02000004817

1. Entity Name
NIPOJEVE, L.L.C.



Principal Place of Business
**7010 SOUTHWEST 48TH LANE
MIAMI, FL 33155**

Mailing Address
**1791 SW 24TH STREET
MIAMI, FL 33145**

30005760



04062005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0567592

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**THOMAS G. SHERMAN, ESQ., P.A.
218 ALMERIA AVE.
CORAL GABLES, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	REBOUL, JEAN CLAUDE
STREET ADDRESS	7010 SOUTHWEST 48TH LANE
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	EVELYNE REBOUL, MEMBER
NAME	7010 SW 48 Lane
STREET ADDRESS	MIAMI, FL 33155
CITY-ST-ZIP	
TITLE	Paul GIRAUD MEMBER
NAME	7010 SW 48 Lane
STREET ADDRESS	MIAMI, FL 33155
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE:

Evelynne Rebul

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

EVELYNE REBOUL

4/06/05 (305) 588-6505

Date

Daytime Phone #

ATTACHMENT 30005760
#L02000004817

State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Organization of NIPOJEVE, L.L.C., a limited liability company organized under the laws of the state of Florida, filed on February 28, 2002, as shown by the records of this office.

I further certify the document was electronically received under FAX audit number H02000046374. This certificate is issued in accordance with section 15.16, Florida Statutes, and authenticated by the code noted below

The document number of this limited liability company is L02000004817.

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
Twenty-eighth day of February, 2002

Authentication Code: 002A00012344-022802-L02000004817-1/1



CR2EO22 (1-99)

Katherine Harris

Katherine Harris
Secretary of State

#02000004817



ATTACHMENT
36005760

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

February 28, 2002

NIPOJEVE, L.L.C.
7010 SOUTHWEST 48TH LANE
MIAMI, FL 33155

The Articles of Organization for NIPOJEVE, L.L.C. were filed on February 28, 2002, and assigned document number L02000004817. Please refer to this number whenever corresponding with this office.

In accordance with section 608.406(2), F.S., the name of this limited liability company is filed with the Department of State for public notice only and is granted without regard to any other name recorded with the Division of Corporations.

The certification you requested is enclosed. To be official, the certification for a certified copy must be attached to the original document number that was electronically submitted and filed under FAX audit number H02000046374.

A limited liability annual report/uniform business report will be due this date between January 1 and May 1 of the year following the calendar year of the file date. A Federal Employer Identification (FEI) number will be required before this report can be filed. Please apply NOW with the Internal Revenue Service by calling 1-800-829-3676 and requesting form SS-4.

Please be aware if the limited liability company address changes, it is the responsibility of the limited liability to notify this office.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Section.

Agnes Lunt
Document Specialist
Division of Corporations

Letter Number: 002A00012344

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#16200000 4817

ATTACHMENT

**ARTICLES OF ORGANIZATION FOR
NIPOJEVE, L.L.C.,
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I-Name:

The name of the Limited Liability Company is:

NIPOJEVE, L.L.C.

ARTICLE II- Address:

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

**7010 Southwest 48th Lane
Miami, Florida 33155**

ARTICLE -III-

Registered Agent, Registered Office, & Registered Agent's Signature:

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

**THOMAS G. SHERMAN, ESQ., P.A.
218 ALMERIA AVENUE
CORAL GABLES, FLORIDA 33134**

**ARTICLE IV
PURPOSE**

The limited liability company shall have the authority to engage in any activity or business permitted under the laws of the United States and of the law of the State of Florida, and the law of any other jurisdiction wherein it may conduct business. This limited liability company may conduct business within or without the State of Florida anywhere in the world that it may so select.

**ARTICLE V
VOTING**

Votes of the members shall be in proportion to their contributions to the capital of the limited liability company as adjusted from time to time, to properly reflect any additional contributions or withdrawals of capital by the members.

**ARTICLE VI-
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.

X The Limited Liability Company is to be managed by its members and is, therefore, a member-managed company.

**ARTICLE VII
MEMBERS**

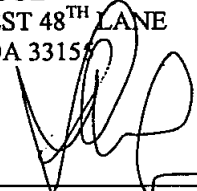
The managing member of the Limited Liability Company shall be:

- 1) JEAN CLAUDE REBOUL
7010 SOUTHWEST 48TH LANE
MIAMI, FLORIDA 33155

And

The Members of the Limited Liability Company is:

- 2) PAUL GIRAUD
7010 SOUTHWEST 48TH LANE
MIAMI, FLORIDA 33155
- 3) EVELYNE REBOUL
7010 SOUTHWEST 48TH LANE
MIAMI, FLORIDA 33155



Print Name: Thomas G. Sherman
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.)

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.



THOMAS G. SHERMAN, ESQ., P.A.
REGISTERED AGENT'S SIGNATURE