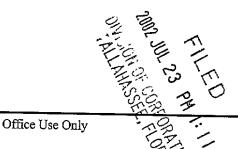
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Capitol Services, Inc.

1406 Hays St., Suite 2

Tallahassee, FL 32301

(850) 878-4734 Kathi or Brent



CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):					
1. <u>Somers</u>	Pet Shoppes proporation Name	Fla LLC	(Document #)		
	•		(Document #)		
2. (Corporation Name)		<u> </u>			
(Corporation Name)		(Document #)			
3		<u> </u>	المستعالية المتحفظة في الرابات العالم والإستان والمستعين المراز والمستعارة		
(Corporation Name)			(Document #)		
4		<u></u>	Vis. o		
(Corporation Name)		,	(Document#)		
Walk in	Pick up time	7/23	Certified Copy $\frac{C}{C}$		
□ Mail Out	□ Will wait	S/amped/ Photocopy	(Document #) (D		
NEW FILINGS		AMENDMENTS	₹ 5		
□ Profit		Amendment			
□ Not for Profit		☐ Resignation of R.A., Officer/Director			
Limited Liability		☐ Change of Registered Agent			
Domestication		☐ Dissolution/Withdrawal			
□ Other		400065891042 - -07/23/0201016020 ****125.00 ****125.00			
OTHER FILINGS		REGISTRATION/QUALIFICATION			
☐ Annual Report		□ Foreign			
□ Fictitious Name		☐ Limited Partnership			
		□ Reinstatement	-		
		□ Trademark			
		□ Other			
			<u> </u>		

CR2E031(7/97)

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Somerset Shoppes Fla LLC

ARTICLE II - Address:

All All Strangers Connection of the second s The mailing address and street address of the principal office of the Limited Liability Compar

4 East 80th Street, New York, NY 10021

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

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

BOD RODERTS					
Nan	ne,				
1 Breakers Row,	Apt.	434			
Florida street address (P.O. Box NOT acceptable)					
Palm Beach	FL	33485			
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.

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)

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.)

Arnold Mandell

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)