

# LD20000026003

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

September 26, 2002

SUBJECT: CARINGARMENTS, LLC.  
( Articles of Organization)

000008148220--0  
-10/02/02--01012--002  
\*\*\*160.00 \*\*\*160.00

Enclosed is an original and one (1) copy of the articles of organization for Florida Limited Liability Company and a check for \$ 160.00 Filing Fee, Registered Agent Designation, Certified Copy and Certificate of Status.

FROM: Jose N. Correa  
J.C. Accounting & Tax Services

833 SAVANNAH FALLS DR  
WESTON, FL 33327

(954) 217-1207  
Daytime Telephone number

FILED IN J.C. ACCOUNTING & TAX SERVICES

02 OCT -2 AM 10:13

10/3 ust

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: CARINGARMENTS, L.L.C.

The name of the Limited Liability Company is:

CARINGARMENTS, L.L.C.

ARTICLE II - Address: 1712 ORCHID BEND, WESTON, FLORIDA 33327

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

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

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

JOSE N. CORREA

Name

833 SAVANNAH FALLS DR.

Florida street address (P.O. Box NOT acceptable)

WESTON

FL 33327

City, State, and Zip

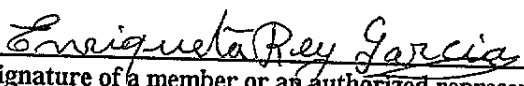
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.)

ENRIQUETA REY

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)