## L02000029908

| (Requestor's Name)                      |
|---|
| (Address)                               |
|   |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (business Enaty Marile)                 |
| (Document Number)                       |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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100008675891

11/07/02--01070--005 \*\*25.00

11/07/02--01070--006 \*\*100.00

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Jh 08-02

November 4, 2002

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attention: Registry

Dear Sirs:

Attached is the executed Articles of Organization for a Florida Limited Liability Company. The name of the L.L.C. and registered agent is as follows:

UV Swimsuit and Swimwear LLC Registered Agent: Dawn Maise

> 9641 N.W. 51st Street Coral Springs, FL 33076

(954)255-5973 or (954)328-1732

Please also find enclosed a check for \$100.00 to cover the filing fee. Thank you.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

| UNSwimsuit and Swimwear LLC   |                |               |     |
|---|----------------|---------------|-----|
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Compa   | my is:         |               |     |
| 9641 N.W. 515t Street, Coral Jorings, FL.   | 330            | 17            | 6   |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  |                |               |     |
| The name and the Florida street address of the registered agent are:  |                |               |     |
| Dawn Marce  | -              | ,             |     |
| Dawn Maise<br>Name<br>9641 N.W. SI St Street  |                |               |     |
| 9641 N.W. SI Street   |                |               |     |
| Florida street address (P.O. Box <u>NOT</u> acceptable)   |                |               |     |
| Coral Sonas FL 33076  |                |               |     |
| City, State, and Zip  |                |               |     |
| Having been named as registered agent and to accept service of process for the above stated in liability company at the place designated in this certificate, I bereby accept the appointment a registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. | s<br>ns of all | ł             |     |
| Claus Maria   |                |               |     |
| Registered Agent's Signature  |                | $\overline{}$ |     |
| (An additional article must be added if an effective date is requested)   | SECRE IN       | 02 NOV -7     |     |
| - fam fff mae   | 1 1 6          |               | 后套  |
| Signature of a member or an authorized representative of a member.  |                | Ī             | (D) |
| (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury  |                | 9<br>5        |     |

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Typed or printed name of signee

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)