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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP MAIL (Business Entity Name) (Document Number) Certified Copies_ Certificates of Status Special Instructions to Filing Officer:

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AL

E, FLORIDA

'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TALE MASSEE, FLORIDA

BELLE EPOQUE LLC

ARTICLE II - Address:

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

5505 DATIL PEPPER RD., ST. AUGUSTINE, FL 32086 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

ROLAND MICHEL FERREOL

Name

5505 DATIL PEPPER RD.

Florida street address (P.O. Box NOI acceptable)

ST. AUGUSTINE FL 32086

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

ROLAND MICHEL FERREOL (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 608408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROLAND MICHEL FERREOL

Typed or printed name of signee

Filing Feer:

\$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)

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REGISTERED AGENT/REGISTERED OFFICE

: STATE ,FLORIDA

PURSUANT TO THE PROVISIONS 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.

| The name of the Limited Liability Company |
|---|
|---|

BELLE EPOQUE LLC

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

ROLAND MICHEL FERREOL (Name)

5505 DATIL PEPPER RD.

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

ST. AUGUSTINE, FLORIDA 32086
FL
(City/State/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.

Signature)

ROLAND MICHEL FERREOL

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)