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OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 TERESA ROMAN (TALLAHASSEE REPRESENTATIVE) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time 2.00 Walk in Certified Copy Will wait Photocopy Mail out Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Other

Examiner's Initials

## ARTICLES OF ORGANIZATION OF

#### DUPONT ENTERPRISES LLC

#### ARTICLE I - NAME

The name of this limited liability company is **DUPONT ENTERPRISES LLC** (hereinafter "the Company")

#### **ARTICLE II - ADDRESS**

The mailing address and principal office is:

1550 NE 33<sup>rd</sup> Street Pompano Beach Fl, 33064

#### ARTICLE III: INITIAL REGISTERED OFFICE AND AGENT

The name and mailing address of the initial registered office and the initial registered agent of the Company is:

Sylvain Dupont 1550 NE 33<sup>rd</sup> Street Pompano Beach Fl, 33064

Having been named as registered agent and to accept service of process for the above state 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.

Sylvain Dupont- Registered Agent

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#### **ARTICLES IV - MANAGEMENT**

The Company will be managed by (1) manager and is, therefore a manager-managed company.

Sylvain Dupont 1550 NE. 33<sup>rd</sup> Street Pompano Beach Fl, 33064

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

Sylvain Dupont, Authorized Representative

### **ORGANIZER**

| this / 8 day of 200.                        | de and subscribed these Articles of Organization 3  |
|---|---|
| ,   | MARCELLE POIRIER  |
| STATE OF FLORIDA )                          |   |
| COUNTY OF DADE ) SS                         |   |
| POIRIER who is well known to me to be the p | lay, personally appeared before me MARCELLE person described in and who executed these Articles ged before me that he executed the same freely and 32 miles are seen as a second |
|   | NOTARY PUBLIC<br>State of Florida at large  |

GAY BONLARRON
MY COMMISSION # DD 045173
EXPIRES: September 11, 2005
Bonded Thru Budget Notary Services

My commission expires: