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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: 120010000247
Phone: (305)674-3313
Fax Number: (305)674-3359

O3 MAY -S PM IZ: 49

### LIMITED LIABILITY COMPANY

THE LAW OFFICES OF KAREN COHEN, P.L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
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ARTICLES OF ORGANIZATION FOR A FLORIDA PROFESSIONAL LIMITED LIABILITY COMPANY In compliance with Chapter 608 AND 621,F.S.

#### ARTICLE I NAME

The name of the Limited Liability Company is: THE LAW OFFICES OF KAREN COHEN, P.L.L.C.

#### ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 88 NE 168TH ST.

N. MIAMI BEACH, FL 33162

## ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

KAREN COHEN

88 NE 168TH ST.

N. MIAMI BEACH, FL 33162

Having been named as registered agent to accept service of process for the above 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 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 as provided for in Chapter 608, F.S..

Registered Agent's

ARTICLE IV PURPOSE

PROVIDE LEGAL SERVICES AND ADVICE

#### ARTICLE V MEMBERS

Managing Member:

KAREN COHEN

88 NE 168TH ST.

N. MIAMI BEACH, FL 33162

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PAGE 2 THE LAW OFFICES OF KAREN COHEN, P.L.L.C.

Karen Lohen

Signature of a member or an authorized representative of a

(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

KAREN COHEN

Typed or printed name of signee

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