

L03000022083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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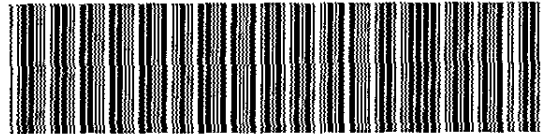
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
03 JUN 18 AM 10:45
STATE
DIVISION OF REGISTRATION
TALLAHASSEE, FLORIDA

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LAZARUS CORPORATE FILING SERVICE

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JUN 18 AM 03:31
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. FIFTY-FIVE LLC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF ORGANIZATION

OF

FIFTY-FIVE LLC.

FILED
JUN 18 AM 10:37
STATE OF FLORIDA
TALLAHASSEE

ARTICLE I - NAME

The name of this limited liability company is **FIFTY-FIVE** ^{LLC} (hereinafter "the Company")
^

ARTICLE II - ADDRESS

The mailing address and principal office is :

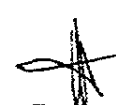
**1627 Brickell Avenue
Suite #1104
Miami, Florida 33129**

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 :

**Carole Hakoun-Perin
1627 Brickell Avenue
Suite #1104
Miami, Florida 33129**

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.



Carole Hakoun-Perin - Registered Agent

ARTICLES IV - MANAGEMENT


The Company will be managed by two (2) managers and is, therefore a manager-managed company.

Carole Hakoun-Perin
1627 Brickell Avenue
Suite #1104
Miami, Florida 33129

Karima Hudson
1540 Pennsylvania Avenue, #6
Miami Beach, Florida 33139

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.



Carole Hakoun-Perin, Authorized Representative

Karima Hudson, Authorized Representative

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JUN 18 AM 10:31
STATE
TALLAHASSEE, FLORIDA

ORGANIZER

IN WITNESS WHEREOF, I have made and subscribed these Articles of Organization
this 16 day of June 2003

FILED
03 JUN 18 10 31
TALLAHASSEE
FLORIDA


MARCELLE POIRIER

STATE OF FLORIDA)
) SS
COUNTY OF DADE)

I HEREBY CERTIFY that on this day, personally appeared before me **MARCELLE POIRIER** who is well known to me to be the person described in and who executed these Articles of Organization as Organizer, and acknowledged before me that she executed the same freely and voluntarily for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 16 of
June 2003.


NOTARY PUBLIC
State of Florida at large

My commission expires :

