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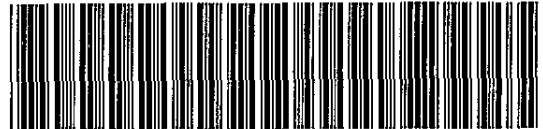
(Business Entity Name)

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**LAZARUS CORPORATE FILING SERVICE**

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

1. PICK-A-GIFT L.L.C.  
(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 checked="" 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  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I- Name:**

The name of the Limited Liability Company is:

**PICK-A-GIFT L.L.C.**

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**ARTICLE II- Address**

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

**Principal Office Address:**

Bernardo Gabriel Gelbspan  
19443 NE 17 Avenue  
North Miami Beach-Fl 33179

Carlos Arturo Monasterirsky  
19654 E. Country Club Dr.  
Aventura-Fl.33180

Adolfo Sergio Rascovsky  
20291 NE 30 Avenue #105  
Aventura-Fl.33180

**Mailing Address:**

19443 NE 17 Avenue  
North Miami Beach-Fl. 33179

19654 E. Country Club Dr.  
Aventura-Fl.33180

20291 NE 30 Avenue #105  
Aventura-Fl.33180

**ARTICLE III-Registered agent, Registered Office, & Registered Agent's Signature:**

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

Adolfo Rascovsky  
Name

20291 NE 30 Avenue-Aventura Fl. #105

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Florida street address (P. O. Box **Not** acceptable)

*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, Florida Statutes..*

  
\_\_\_\_\_  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

**Name and Address**

"MGR"- Manager  
"MGRM"- Managing Member

MGRM  
\_\_\_\_\_

Adolfo S. Rascovsky  
20291 NE 30 Avenue #105  
Aventura-Fl. 33180


MGR \_\_\_\_\_

Carlos Arturo Monastirsky  
19654 E. Country Club Dr.  
Aventura-Fl.33180

MGR \_\_\_\_\_

Carlos Arturo Monastirsky  
19654 E. Country Club Dr.  
Aventura-Fl.33180

**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member**

( 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 true.)

Adolfo Sergio Rascovsky

Typed or printed name of signee