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(Document Number)

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

1. VANILLE LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" 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

OF

VANILLE LLC

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

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

ARTICLE II - ADDRESS

The mailing address and principal office is :

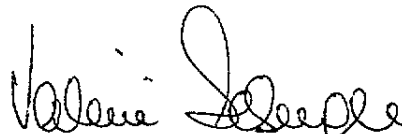
**600 Brickell Avenue
Suite 103
Miami, Florida 33131**

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 :

**~~Vanille LLC~~
Valerie Desvigne
600 Brickell Avenue
Suite 103
Miami, Florida 33131**

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.



Valerie Desvigne- Registered Agent

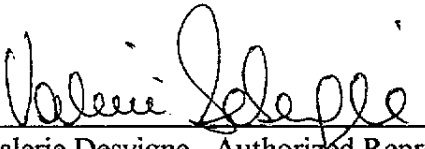
ARTICLES IV - MANAGEMENT

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

Valerie Desvigne
600 Brickell Avenue
Suite 103
Miami, Florida 33131

Virginie Tommasini
600 Brickell Avenue
Suite 103
Miami, Florida 33131

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.


Valerie Desvigne , Authorized Representative,



Virginie Tommasini Authorized Representative

ORGANIZER

IN WITNESS WHEREOF, I have made and subscribed these Articles of Organization
this 2 day of March 2004


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 he executed the same freely and voluntarily for the purposes therein expressed.

SWORN TO AND SUBSCRIBED before me this 2nd of
March 2004.


NOTARY PUBLIC
State of Florida at large

My commission expires :

