

P.01 Page 1 of 1

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000135721 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0363

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)222-9428

GONPORATION

LIMITED LIABILITY COMPANY

Genora, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Wantenle Filipa Manu

Crisis of the Course

Public Access to

ARTICLE 1 - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Genora, LLC		
ARTICLE II - Address:	·	
The mailing address and street address of	the principal office of the Limited Liability Compa	my is:
Principal Office Address:	Mailing Address:	
1671 NW 101 Way	1671 NW 101 Way	
Plantation, FL 33372	Plantation, FL 33372	_
		_
	ALL	ا 04 م
The name and the Florida street address of	f the registered agent are:	NOC 70
The name and the Florida street address of	f the registered agent are:	62 NN 50 LIF
The name and the Florida street address of	f the registered agent are:	l 62 NOT 50 I
The name and the Florida street address of Per 232 A	f the registered agent are: ALL AHASSE Name SECOND SECOND	1 04 JUN 29 AM 8: 25

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..

By:

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

JUN-29-2004 12:24

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Mrs. Niki Sirota
	1671 NW 101 Way
	Plantation, FL 33322
MGRM	Mr. Nomian Sirota
	1671 NW 101 Way
	Plantation, FL 33322
(Use attachment if necessary)	

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member ir in authorized representative of a member.

(In accordance with section 60.408(3), which Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Peter J Yanowitch

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

O4 JUN 29 AM 8: 25
SECINCIPALLAHASSEE, FLORIDA

Page 2 of 2