L04000054270

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ON JUL 21 M 9: 19 OFFICE USE ONLY(DOCUMENT #) LAZARUS CORPORATE FILING SERVICE <u>3320 S.W. 87 AVENUE</u> MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Comporation Name) (Document #) (Corporation Name) (Document #) (Corporation Nama) (Document #) Walk in 个 Pick up time Certified Copy. Certificate of Status Will wait Photocopy Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other **REGISTRATION** OTHER FILNGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 19, 2004

LAZARUS

TALLAHASSEE, FL

SUBJECT: NINA'S PLAY HOUSE FACTORY L.L.C.

Ref. Number: W04000027529

We have received your document for NINA'S PLAY HOUSE FACTORY L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

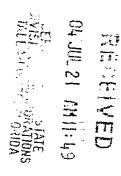
Please supply the ADDRESS in Article II.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 804A00045612



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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
NINa's Play House FACTORY L.L.C.
14 INA 5 1 mg
ARTICLE II - Address: The mailing address and street address of the unimainal office of the Limited Lightlity Company is:
The mailing address and street address of the principal office of the Limited Liability Company is: 2000 S. Dixie Huz # 100
MIAMI FI 33133 - 0
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Nader Shahidi 700 9 5
Name Post
2000 3- DIXIE HWY #100
Florida street address (P.O. Box NOT acceptable)
City, State, and Zip
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, F.S
M. Shalisty
Registered Agent's Signature
Article IV - Management (Check box if applicable.)
The Limited Liability Company is to be managed by one manager or more managers and is,
therefore, a manager - managed company.
Manager - Nader Shahidi. 2000 8. Dixie Hury #100
MIANJ F1 33133
(An additional article must be added if an effective date is requested)
Signature of a member or an authorized representative of a member.
Organitate of a member of an authorized representance 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.)
Noder Shahidi
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)