# 04 Cold Department of State 855 Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

Fax Number : (305)633-9696

### LIMITED LIABILITY COMPANY

all things glass, llc

Certificate of Status	0	
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Page Count	03	
Estimated Charge	\$155.00	

104-54855



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 22, 2004

EMPIRE

SUBJECT: ALL THINGS GLASS, LLC

REF: W04000028120

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address a	ess: and street address of the priv	cipal office of the Limited Liabi	ility Con
Principal Office Add	<u>Iress:</u>	Mailing Address:	
16105 N.E. 18th Avenue Mismi, Florida 33162	Miami, Florida 33162	16105 N.E. 18th a	venue.
		Miomi, FL 33	<u></u>
ARTICLE III - Regis	itered Agent, Registered Crida street address of the reg	office, & Registered Agent's Si istered agent are:	gaature
ARTICLE III - Regis The name and the Flo	itered Agent, Registered Crida street address of the reg Victor Rones,	istered agent are:	gaaturo
ARTICLE III - Regis The name and the Flo	rida street address of the reg	istered agent are:	gaaturo
ARTICLE III - Regis The name and the Flo	rida street address of the reg Victor Rones, Name	istored agent are:  Esq.  Avenue	gnaturo
ARTICLE III - Regis	rida street address of the reg Victor Rones, Name	istored agent are:  Esq.  Avenue	gnaturo
ARTICLE III - Regis The name and the Flo	rida street address of the reg Victor Rones, Name	istored agent are:  Esq.  Avenue  Hox NOT acceptable)	gaaturo

Registered Agent's Signature

Pagelof 2 (CONTINUED)

404000150705

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Managor or Managing Member is as follows:

Title: "MGR?" = Manager "MG1W" = Managing Member	Name and Address:
MGR	Ellen Walsh
	8108 SW 172nd Terrace
	Miami, Florida 33157
mar	Kathryn Bolkin
	10362 SW 113rd Street
	Miami, Florida 33176
MGR	Barbara Perlmutter
	10601 SW (27th Street
	Miami, Florida 33176
(Use attachment if necessary)	

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

REQUIRED SIGNATURE:

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

(In accordance with section 608.408(3), Plorida Statutes, the execution of this document constitutes an affirmation under the penaltics of perjury

that the facts stated herein are true.)

Barhara Perlmutter

Typed or printed name of signee

\$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)

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