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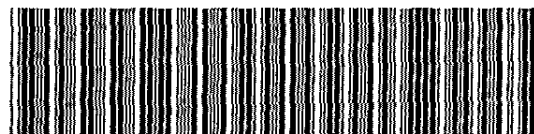
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A&E COSMETICS AND HAITIAN ARTIFACTS
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CELINA JEAN-JACQUES
(Name of Person)

A&E COSMETICS AND ARTIFACTS
(Firm/Company)

155 COWNIE AVE SE
(Address)

PALM BAY FL 32909
(City/State and Zip Code)

For further information concerning this matter, please call:

CELINA JEAN-JACQUES at (321) 7284203
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 27, 2004

VELINA JEAN-JACQUES
A&E COSMETICS AND ARTIFACTS
155 COWNIE AVE SE
PALM BAY, FL 32909

SUBJECT: A&E COSMETICS AND ARTIFACTS
Ref. Number: W04000020759

We have received your document for A&E COSMETICS AND ARTIFACTS and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 704A00037256

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

A&E COSMETICS AND ARTIFACTS L.L.C

ARTICLE II - Address:

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

Principal Office Address:

155 COWNIE AV SE

PALM BAY FL 32909

Mailing Address:

155 COWNIE AV SE

PALM BAY FL 32909

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

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

CELINA JEAN- ACQUES

Name

155 COWNIE AV SE


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

PALM BAY FL 32909

FLORIDA

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, 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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

"MGR"

ERNICIE JEROME

155 COWNIE AV SE

PALM BAY FL 32909

"MGRM"

ABEL M JEROME

155 COWNIE AV SE

PALM BAY FL 32909

"MGR"

CELINA JEAN-JACQUES

155 COWNIE AV SE

PALM BAY FL 32909

(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), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CELINA JEAN-JACQUES

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)