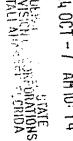
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(Requestor's Name) (Address)	400040990954
(Address)	1000 1000000 1
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	10/07/0401023004 **
(Business Entity Name)	T Q
(Document Number) Certified Copies Certificates of Status	OH OCT -7 AM IO: I

Special Instructions to Filing Officer:

Office Use Only



**125.00



UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue
Tallahassee, Florida 32301
(850) 681-6528



CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

7 347	Eastern	Caribbean Investments, LLC
		
	Filing Evidence ☑ Plain/Confirmation Copy	Type of Document ☐ Certificate of Status
	□ Certified Copy	☐ Certificate of Good Standing
		□ Articles Only
	Retrieval Request Photocopy Certified Copy	 □ All Charter Documents to Include Articles & Amendments □ Fictitious Name Certificate □ Other
	NEW FILINGS	AMENDMENTS
	Profit	Amendment
	Non Profit	Resignation of RA Officer/Director
X	Limited Liability	Change of Registered Agent
	Domestication	Dissolution/Withdrawal
	Other	Merger
	OTHER FILINGS	REGISTRATION/QUALIFICATION
	Annual Reports	Foreign
	Fictitious Name	Limited Liability
	Name Reservation	Reinstatement
	Reinstatement	Trademark
		Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ANTE OF THE STATE	
C. COMPANY	

FLORIDA LIMITED LIABII	LITY COMPANY	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
ARTICLE I - Name: The name of the Limited Liability Company is:		O.
• • •		
Eastern Caribbean Investments, Li	LC ————————————————————————————————————	
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
2080 Ocean Drive, Unit 1107	Same	
Hallandale, FL 33009		
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register		ture:

	Tim Y	Voigt_			<u>۔ ۔ .</u>	
*	1.4		Name			
	2080	Ocean	Drive,	Unit	110	07
	Flor	rida street ac	idress (P.O. I	Box <u>NOT</u>	accep	table)
		Hallar	ndale,	FLOR	ΙDΑ	33009
		C	ity, State, and	l 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

Page 1 of 2 (CONTINUED)

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

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

Managing	Member			John F. Nolan
		• •		- 50 Lafayette Road
	•		2	Rochester, NY 14609
			* • •	Company of the compan
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	-			
			-	
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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.)

John F. Nolan

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)