Florida Department of State
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To:

Division of Corporations

Fax Number : (850) 205-0383

Prom:

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850)385-6735
Fax Number : (954)641-4192

LIMITED LIABILITY AMENDMENT

SPANISH CREATIONS, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST:	The name of the limited liability company is: SPANISH CREATIONS, LLC.		
SECOND:	The articles of organization or the application to transact business		
CHECK	THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	TEMENT	
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	defectively signed. The manner in which the document was defectively ppropriate correction is as follows:	signed and	
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Dated:	April 11 2005	1987	-
	Signature of a member or authorized representative of a member	- AM SSEE.F	T
	Typed or printed name of signee	20.0 8:-0	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Spanish Creations, LLC

ARTICLE II- Address:

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

Principal Office Address:

Mailing Address:

3006 Aviation Avenue Suite 2A Coconut Grove, Florida 33133 3006 Aviation Avenue Suite 2A Coconut Crove, PL 33133

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

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

Florida Corporate Services, LLC 3006 Aviation Avenue, Suite 2A Coconut Grove, Florida 33133

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 furthor 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 508, F.S.

Registered Agent's Signature

HO 50000 88303

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

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

Title:
"MGR" = Manager

Name and Address:

"MGRM" = Managing Member

8502970283

MGRM

Richard Ciarsolo

3006 Aviation Avenue, 2A Coconut Grove, FL 33133

MGRM Giselle Lopez
3006 Aviation Avenue. 2A
Coconut Grove, FL 33133

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.)

Typed or printed name of signee