

L0500 0036034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

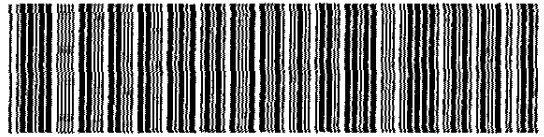
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300049561703

04/11/05--01031--011 **160.00

FILED
05 APR 11 AM 11:03
TALLAHASSEE, FLORIDA

T. Brumbley APR 13 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CREATIONS J.E.K. LLC.
(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:

Karol E. Cardenas
(Name of Person)

Creations J.E.K. LLC
(Firm/Company)

5660 W 13 AVE
(Address)

Hialeah, FL 33012
(City/State and Zip Code)

For further information concerning this matter, please call:

Karol E. Cardenas at (786) 303-3634
(Name of Person) (Area Code & Daytime Telephone Number)

FILED
05 APR 11 AM 11:03
TALLAHASSEE FLORIDA

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CREATIONS J.E.K., 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:

5660 W 13 Ave
Hialeah, FL 33012

5660 W 13 Ave
Hialeah, FL 33012

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

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

Karol E. Cardenas
Name

5660 W 13 Ave
Florida street address (P.O. Box **NOT** acceptable)

Hialeah, FL 33012
City, State, and Zip

FILED
05 APR 11 AM 11:03
TALLAHASSEE, FLORIDA

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..


Registered Agent's Signature

(CONTINUED)

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

Karol E. Cardenas
5660 W 13 Ave
Hialeah, FL 33012

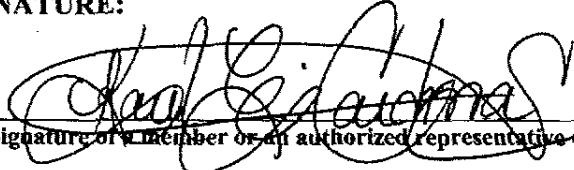
MGRM

Jesus O. Cardenas
5660 W 13 Ave
Hialeah, FL 33012

(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.)

Karol E. Cardenas

Typed or printed name of signee

STATE OF FLORIDA
TALLAHASSEE

05 APR 11 AM 11:03

FILED

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)