

May 10 2005 14:54

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p. 1

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
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Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : NATIONAL REGISTERED AGENTS, INC.
Account Number : I20030000062
Phone : (609) 716-0300
Fax Number : (609) 716-0820

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Zahara Mossman, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

1. 05/11/05

Electronic Filing Menu

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H05000119069 3

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Zahara Mossman, LLC**ARTICLE II - Address:**

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

Principal Office Address:1521 Alton Road #148Miami Beach, Florida 33139-3301**Mailing Address:**1521 Alton Road #148Miami Beach, Florida 33139-3301**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Zahara Mossman

Name

1521 Alton Road #148

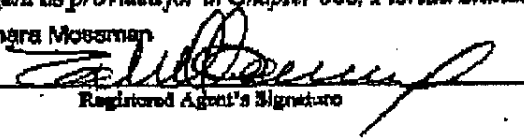
Florida street address (P.O. Box, NOT acceptable)

Miami BeachFLORIDA 33139-3301

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.

Zahara Mossman

By: 

Registered Agent's Signature

H05000119069 3

Page 1 of 2

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H05000119069 3

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:MGRMZahara Mossman1821 Allen Road #140Miami Beach, Florida 33139-3301

(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 607.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Zahara Mossman - Member

Typed or printed name of signer

Filing Fees:

\$104.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

H05000119069 3

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