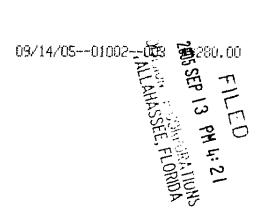
# L05000090000

(Re	questor's Name)		
(Address)			
(Address)			
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	TIAW 🔲	MAIL	
. (Bu	siness Entity Na	me)	
. (Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to Filing Officer:			
		İ	

Office Use Only



500059101095



US SEP 13 PM 3: 21

4 BRYMAN SEP 1 3 2005



## UCC Filing & Search Services, Inc.

1574 Village Square Boulevard, Suite 100 Tallahassee, Florida 32309 (850) 681-6528

# **HOLD** FOR PICKUP BY

**UCC SERVICES** OFFICE USE ONLY

September 13, 2005

D.	EKVILES	CORPORATION NAME (S) AND DOCUM	MENT NUMBER (S):
Chop:	shop Apparel, LLC	·	
	Filing Evidence  Plain/Confirmation Copy	Type of Docume  Certificate of State	
	○ Certified Copy	☐ Certificate of Goo	od Standing
		☐ Articles Only	
	Retrieval Request  Photocopy  Certified Copy	☐ All Charter Docu Articles & Amen ☐ Fictitious Name (☐)	dments
	NEW FILINGS	AMENDMENTS	THE THE
	Profit	Amendment	ED SSEE
	Non Profit	Resignation of RA Officer/Director	E.G.
X	Limited Liability	Change of Registered Agent	21 JRIDA
	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

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

Chopshop Apparel, LLC

#### ARTICLE II - Address:

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

Principal Office Address:

9200 South Dadeland Blvd. – Suite 508 Miami, FL 33156 Mailing Address:

9200 South Dadeland Blvd. - Suite 508 Miami, FL 33156

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

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

United Corporate Services, Inc. 9200 South Dadeland Blvd., Suite 508, Miami, Florida 33156

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

### 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:
MGRM	Michael Baez P.O. Box 415129. Miami Beach, FL 33141
MGRM	Christopher Stern P.O. Box 415129. Miami Beach, FL 33141

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

(In accordance with Section 608 408(3), Florida Statutes, the execution of this document constitutes affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Fees: \$190.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)