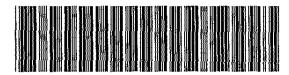
# 1060000 37108

| (Requestor's Name)                      |                       |
|---|-----------------------|
| (Address)                               |                       |
| (Address)                               |                       |
| (City/State/2                           | rip/Phone #)          |
| PICK-UP \                               | VAIT MAIL             |
| (Business E                             | intity Name)          |
| (Document Number)                       |                       |
| Certified Copies Co                     | ertificates of Status |
| Special Instructions to Filing Officer: |                       |
|   |                       |
|   |                       |
|   | B 4/191               |
| Office                                  | Use Only              |



300069291913

04/06/06--01020--026 \*\*125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE

## 17121 Morris Bridge Road Thonotosassa, FL 33592-2259 (813) 782 - 1990

\* TAMPA ACCOUNTING & TAX SERVICE. INC.

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

> Southeast Gift Distribution, L. L. C SUBJECT:

Enclosed is an original copy of the Articles of Organization and a check for \$ 125.00

Please return all documentation to:

**Jeffrey Antous** 

300 S. Florida Avenue Tarpon Springs, FL 34689

Thank you.

Tampa Accounting & Tax Service, Inc.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned, being a natural person competent to contract for the purpose of forming a Limited Liability Company pursuant to Chapter 608 of the Florida Statutes, hereby adopts the following Articles in order to form a limited liability company under the laws of the State of Florida.

#### ARTICLE I

The name of the Limited Liability Company is: Southeast Gift Distribution, L. L. C.

#### ARTICLE II

The mailing and street address of the Limited Liability Company is: 300 S. Florida Avenue, Tarpon Springs, FL 34689.

#### ARTICLE III

This Limited Liability Company shall commence upon the filing of these Articles and shaperpetually.

### ARTICLE IV

The Limited Liability Company is to be managed by the members and the initial name addresses of the members are:

Beverly Polito

Jeffrey Antous

Darlene Antous

Norman Braverman

David Polito

300 S. Florida Avenue, Tarpon Springs, FL 34689

255 Willow Springs, N. Milford, CT 06776

17A Olde Mistick Village, Mystic, CT 06355

13021 Pelican Lane, Unit B, Madeira Beach, FL 33708

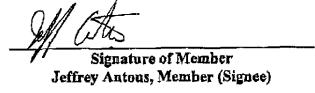
#### ARTICLE V

13021 Pelican Lane, Unit B, Madeira Beach, FL 33708

Additional members may be added with unanimous consent of the other members plus payment of an amount of cash to the Limited Liability Company equal to a pro-rata amount of cash contributed by the existing members.

#### ARTICLE VI

There shall be the right of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or of the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.



(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

> Signature of Member Darlene Antous, Member (Signee)

(In accordance with section 608.408(3), Plorida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

> Signature of Member Norman Braverman, Member (Signee)

Norman Braverman, Member (Signee)

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

David Polito, Member (Signee)

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

> Signature of Member Beverly Polito, Member (Signee)

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

#### CERTIFICATE OF REGISTERED AGENT

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The Name of the Limited Liability Company is:

#### Southeast Gift Distribution, L. L. C

The name and Florida street address of the Registered Agent is:

Jeffrey Antous

300 S. Florida Avenue

Tarpon Springs, FL 34689

. SECRETARY OF STATE

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the 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.

DATED: This 16th day of March, 2006.

Registered Agent