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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	;				
FABBRI CR	FATIONS LI	C			
SUBJECT: FABBRI CREATIONS LLC (Name of Limited Liability Company)					
The enclosed Articles of Organiza	ation and fee(s) are s	uhmitted for fil	ino		
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:					
·	one of the same	2 to me 3011011			
EVA FABBRI		Name of Person)			
FABBRI CREA	TIONS				
IADDITIONLA		Firm/Company)	······································		
2213 SOUTH WEST 58 TERRACE					
		(Address)			
HOLLYWOOD FLORIDA 33023					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
EVA FABBRI		at (954	614-31	13	
(Name of Person)	I	(Area C	614-31 ode & Daytime To	lephone Number)	
Enclosed is a check for the following	owing amount:				
\$125.00 Filing Fee \$13 Certific	0.00 Filing Fee & cate of Status	Certified C	Filing Fee & opy py is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Registr Divisio P.O. B	g Address ation Section on of Corporations ox 6327 assee, FL 32314	Regist Divisi Cliftor 2661 I	Courier Addression Section on of Corporation Building Executive Center assee, FL 32301	as	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FABBRI CREATIONS LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LI.C," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2213 SOUTH WEST 58 TERRACE

HOLLYWOOD FL. 33023

1801 SOUTH OCEAN DR. #334 HALLANDALE BEACH FL. 33009

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ADRIANA FABBRI-KERNS

Name

10627 FALLS ST.

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

WELLINGTON

FI

33414-3140

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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

DIVISION OF CORPORATIONS

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM **EVA FABBRI** 1801 SOUTH OCEAN DR. #334 HALLANDALE BEACH, FL. 33009 MGRM **LUIGI FABBRI** 1801 SOUTH OCEAN DR. #334 HALLANDALE BEACH, FL. 33009 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

EVA FABBRI

Typed or printed name of signee

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)