## 11000111674

(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:				
LLC				

Office Use Only



700082386627

12/08/06--01039--020 \*\*130.00

O6 DEC -8 AM II: 09
SECRETARY OF STATE

## \* TRANSMITTAL LETTER \*

Division o	f Corporations
SUBJECT:	A WONDERFUL INVESTMENT, LLC
<u> </u>	(Name of Limited Liability Company)
The enclosed Articl	es of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	LUC JEAN
	(Name of Person)
	(Firm/Company)
	410 S.W. 74th AVENUE
	(Address)
	NORTH LAUDERDALE, FLORIDA 33068
_	(City/State and Zip Code)
For further informa	tion concerning this matter, please call:
	LUC JEAN at (954) 854-0921  (Area Code & Davrime Telephone Number)
	Jame of Person) (Area Code & Davime Telephone Number)

STREET ADDRESS:

TO:

Registration Section

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

	A WONDERF	UL INVESTMENT, LLC	<u> </u>
ARTICLE II - Address: The mailing address and s	treet address of the pri	ncipal office of the Limited	Liability Compan
Principal Office Address	<u>s:</u>	Mailing Address:	
410 S.W. 74th AVENU	JE	410 S.W. 74th AVEN	IUE
NORTH LAUDERDALE, FL	LORIDA 33068	NORTH LAUDERDA	ALE, FLORIDA 330
The name and the Florida	street address of the re	Office, & Registered Agen egistered agent are:	t's Signature: 06 DEC
The name and the Florida	LUC JEAN  Name  410 S.W. 74th  Florida street address (P.O.	egistered agent are:  AVENUE  Box NOT acceptable)	06 D SEL
The name and the Florida	LUC JEAN Name 410 S.W. 74th	AVENUE Box NOT acceptable)  FLORIDA 33068	06 DEC -8 AM II: 0 SECRETARY OF STAT TALLAHASSEE, FLOR

Page 1 of 2 (CONTINUED)

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				
NODA	LUO ITAN			
MGRM	LUC JEAN			
	410 S.W. 74th AVENUE			
	NORTH LAUDERDALE, FLORIDA 33068			
MGRM	ACNER OLIBRIS			
	8221 SOUTHWEST 9th PLACE			
	NORTH LAUDERDALE, FLORIDA 33068			
MGRM	PERICLES OLIBRIS			
	8221 SOUTHWEST 9th PLACE			
	NORTH LAUDERDALE, FLORIDA 33068			
MGRM	RESSILIEN PIERRE CHARLES			
	1441 NORTHWEST 20th COURT #-B			
	FORT LAUDERDALE, FLORIDA 33068			
(Use attachment if necessary)				

\* ARTICLE, POST DATE EFFECTIVE JANOARY 1ST, 2007

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.)

LUC JEAN

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)