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DEFAS HIGHLOF STATI IIVISION OF CORPORATIO TALLAHASSEE, FLORIO

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**LAZARUS** CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Walk in Certified Copy Will wait Certificate of Status Mail out Photocopy **NEW FILINGS AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director **Limited Liability** Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger REGISTRATION/QUALIFICATION **OTHER FILINGS** Annual Report Foreign Limited Partnership Fictitious Name Reinstatement Trademark Other

Examiner's Initials

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
FASHION BELT LLC	「
(Must end with the words "Limited Liability Company	y, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10973 SW 4 STREET	10973 SW 4 STREET
MIAMI, FLORIDA 33174	MIAMI, FLORIDA 33174
	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
	or the registered agent are.
LUIS MORA	Name
10973 SW 4 STREE	
MIAMI,	FL 33174
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

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>		Name and Address:
"MGR" = N "MGRM" =	Aanager Managing Member	
MGRM		FRANCI MORA
-	<del> </del>	10973 SW 4 STREET
		MIAMI, FLORIDA 33174
MGRM		LUIS MORA
<del></del>	<del></del>	10973 SW 4 STREET
		MIAMI, FLORIDA 33174
· · · · · · · · · · · · · · · · · · ·	<del></del>	
(Use attach:	ment if necessary)	
TICLE V: Effe	ctive date, if other than the	date of filing: (OPTIONAL)
an effective date	is listed, the date must be	specific and cannot be more than five business days prior
r 90 days after t	the date of filing.)	
REQUIRE	D SIGNATURE:	
	Signature of a member	or an authorized representative of a member.
	(In accordance with sec of this document constitution that the facts stated he	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)
	FRANCI MORA	
	Tvr	ned 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)