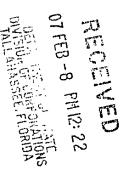
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BECRETARY OF STATE
LLAHASSEF, FLORIO

Office Use Only

COVER LETTER		
TO: Registration Section Division of Corporations		
SUBJECT: Imperial Investments (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jose Tapia, Jr (Name of Person)		
(Firm/Company)		
2425 Jancell Drive (Address)		
Tallahassee, Fl 32303 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Tobe Tapia Jr at (954) 895-2054 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$  Certificate of Status  Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Imperial Investme (Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2425 Janrell Drive Tallahabbec, Fl 32303	2425 Janrell Drive Tallahassee, fl 52303
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ed Agent. You must designate an individual or another
The name and the Florida street address of the reg	
Jose Ta	AHASSE -8
A425 Janrell Florida street addre Tallahassee City, State, and	Drive E OF SIA
liability company at the place designated in thi registered agent and agree to act in this capacity. statutes relating to the proper and complete perf	cept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and yed agent as provided for in Chapter 608, F.S

(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> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Jose Tapia a425 Inniell Drive Tollahasser, Fl 32303	
(Use attachment if necessary)	ate of filing: (OPTIONAL)	
(If an effective date is listed, the date must be to or 90 days after the date of filing.)	specific and cannot be more than five business days prior	
REQUIRED SIGNATURE:	11	
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.)		
<u>Jose</u>	Tapia Jr ed 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)