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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

Christe' Tu'

Certificate of Status	1
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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name

**Christe' Tu' LLC**

The name of the Limited Liability Company is:

## ARTICLE II - Address

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

Principal Office Address:

75 King St., Suite 121

St. Augustine, FL 32084

Mailing Address:

75 King St., Suite 121

St. Augustine, FL 32084

## ARTICLE III - Registered Agent, Registered Office &amp; Registered Agent's Signature

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

**Susan Cafiso**

5085 Medoras Ave. Name

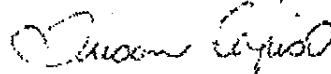
St. Augustine, FL 32084 (P.O. Box or Mail Drop Box NOT Acceptable)

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*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 - Susan Cafiso

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

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

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Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Susan Cafiso, 5085 Medoras Ave., St. Augustine, FL 32080

MGR

Matt Cafiso, 5085 Medoras Ave., St. Augustine, FL 32080

(Use attachment if necessary)

REQUIRED SIGNATURE:

  
\_\_\_\_\_  
Signature of a member or 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. )

Susan Cafiso

Typed or printed name of signer

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