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CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

EFFECTIVE DATE 9/12/07

IAMI, FL 33165 (305) !	552-5973
	Office Use Only
PORATION NAME(S) & DOC	CUMENT NUMBER(S), (if known):
ETAIL INVEST	Office Use Only CUMENT NUMBER(S), (if known): TMENT GROUP, LLC (Document #)
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(Corporation Name)	(Document #)
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Walk in Pick up time	2.00 Certified Copy
Mail out	Photocopy Certificate of Status
W FILINGS	<u>AMENDMENTS</u>
Profit	Amendment
Not for Profit Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
HER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
	Reinstatement
	Trademark
	☐ Other
	Examiner's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY TO THE PARTY OF TH **ARTICLE I - Name:** The name of the Limited Liability Company is: EFFECTIVE DATE RETAIL INVESTHENT GROUP, LLC (Must and with the words "Limited Linbility Company, "Limited Company" or their abbreviation "LLC," or "L.C.,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company **Principal Office Address:** Mailing Address: SAME ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limbility 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 streat address of the registered agent are: Name 3580 ROCKERMAN RD Florida street address (P.O. Box NOT acceptable) M/AM/, FL 33133 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.

(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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Mem	YAMIL KURI
MGRY	3580 ROCKERMAN RD HIANI, FL 33/33 AVI EVIR 13/2 N STATE RD 7 MARGATE, FL 33063
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(Use attachment if necessar	er than the date of filing: 9-12-07. (OPTIONAL)
(If an effective date is listed, the date of filing	te must be specific and cannot be more than five business days prior
REQUIRED SIGNATUR	E:
(In accorder of this doc	of a member or an authorized representative of a member. once with section 608.408(3), Florida Statutes, the execution ument constitutes an affirmation under the penalties of perjury facts stated herein are true.)
• **	YA71L KURJ 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)