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Division of **2010119**

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Division of Corporations

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FLORIDA/FOREIGN LIMITED LIABILITY

CLOUD NINE JEWELS, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CLOUD NINE JEWELS, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

	•	ļ
Principal Office Address:	Mailing Address:	11 11 1
18507 SOUTH DIXIE HWY	ACCOT COLUMN DIVIE ANNO	
	18507 SOUTH DIXIE HWY	[^
MIAMI FL 33157	MIAMI FL 33157	1
(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	EC.	th 97 0CT
CHRISTIAN (GALANTE SSE	-4 H
18507 SOUTH	DIXIE HWY css (P.O. Box NOT acceptable)	8: 23
MIAMI	- 33157	. •

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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	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:		
	MGRM	CHRISTIAN GALANTE 18507 SOUTH DIXIE HWY	+	
	MGRM	MIAMI FL 33157	+	
	MGRM	MICHAEL NOVOA 18507 SOUTH DIXIE HWY MIAMI FL 33157	- - 	
			<u>+</u>	
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	+	
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			Ī, :. ··· .	
	(Use attachment if necessary)		1,5 × 15 ·	
(If an	CLE V: Effective date, if other than the date effective date is listed, the date must be specified days after the date of filing.) REQUIRED SIGNATURE:	e of filing: (OPTIC ecific and cannot be more than five business	ONAL) days prior	
	(In accordance with section of this document constitutes that the facts stated herein		FILED	
		or printed name of signee	H 8:	