Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)634-3694
Fax Number: (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

lauren w., l.l.c.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Electronic Filing Menu

Corporate Filing Menu

Help

of 1

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

LAUREN W., L.L.C.

ARTICLE I

The name of the Limited Liability Company shall be: LAUREN W., L.L.C.

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company: 20903 LEEWARD COURT, AVENTURA, FL 33180.

ARTICLE IV

The name and the Florida street address of the registered agent: SIMON COHEN, 29 N. FEDERAL HIGHWAY, HALLANDALE, FL 33009.

ARTICLE V

The name of the Managing Member(s) and Member(s) shall be:

MANAGING MEMBER/MEMBERS

TINA MARIE C. KNOWLES-WOODS

SIMON COHEN

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

(Name of Company)

He ving been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization. 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.

Registered Agent

Signature of a member or an authorized representative of a member.

(in accordance with section 608.408(3), Florida Stantes, the execution of this document constitutes an affirmation under the penalties of perjuty that the factuated begin are true.)

Typed or printed name of signer

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