

LD8000010135

Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : EMPIRE CORPORATE KIT COMPANY
 Account Number : 072450003255
 Phone : (305) 634-3694
 Fax Number : (305) 633-9696

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 SECRETARY OF STATE
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

coco sun, llc

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ARTICLES OF ORGANIZATION FOR COCO SUN, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is: **Coco Sun, LLC**

ARTICLE II - Address:

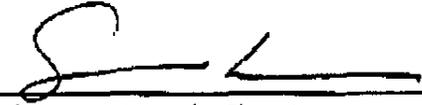
The mailing address and street address of the principal office of the Limited Liability Company is: **c/o Samuel Spencer Blum, Esquire, 2666 Tigertail Avenue, Suite 106, Coconut Grove, Florida 33133.**

ARTICLE III -

Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are: **Samuel Spencer Blum, Esquire, 2666 Tigertail Avenue, Suite 106, Coconut Grove, Florida 33133.**

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, Florida Statutes.


Registered Agent's Signature

Article IV - Manager(s) or Managing Member(s)

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

Title:

Name and Address:

Manager

David Wollach
c/o Samuel Spencer Blum, Esquire

Samuel Spencer Blum

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ATTORNEY AT LAW

2666 TIGERTAIL AVENUE, SUITE 106 COCONUT GROVE, FLORIDA 33133 TELEPHONE: (305) 864-1885 TELEFAX: (305) 864-2314
FAX: (305) 864-2314

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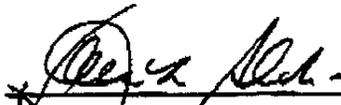
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2666 Tigertail Avenue
Suite 106
Coconut Grove, Florida 33133

Manager

Joel K. Slater
243 West Sabal Palm Place
Longwood, Florida 32779



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.)

Joel K. Slater
Typed or printed name of signee

FILING FEES:
\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)
\$ 5.00 Certificate of Status (OPTIONAL)

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Samuel Spencer Blinn

ATTORNEY AT LAW

2666 TIGERTAIL AVENUE, SUITE 106 COCONUT GROVE, FLORIDA 33133 TELEPHONE: (305) 854-1885 TELEFAX: (305) 854-3314
E-MAIL: sspb@samblinn.com