

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

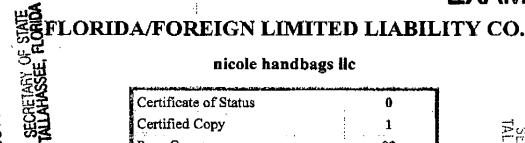
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L. SELLERS

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EXAMINER



nicole handbags lic

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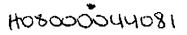
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Limited Liability Company	is:		
NICOLE HANDBAGS_LLC			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Lizbility Company is:		
Principal Office Address:	Mailing Address:		
1990 N. W. 20th Street	SAME		
MIAMI, FL 33142			
The name and the Florida street address of the MOSHE NAHUM	red Office, & Registered Agent's Signature ne registered agent are:		
Name 20221 N.E. 25 TH AVENUE			
Florida street address (P.O.)	Box NOT acceptable)		
MIAMI, FL 33180			

Having been named as registered agent and to accept service to process for the above stated liability company of 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 in Chapter 608, F.S.

Registered Agent's Signature

(CONTINUED)

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Title: "MGR" = Manager	Name and Address:	
"MORM" = Managing Member		
MGRM	MOSHE NAHUM	
	20221 N.E. 25 TH AVENUE	
	MIAMI. FL 33180	
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:		•
- MA-9-	A NAHOLO	
Signature of men	mber or an authorized representative of a member	
	8(3), Florida Statutes, the execution of this document constitutes an enjury that the facts stated herein are true.)	
	GHE SAHILAN -	
MO	Pro P	
MO ; Typed o	or printed name of signee	-
Typed o	pr printed name of signee	Mr. Mary
Filing Fees:	CRETARY OF Registered Agent RESERVED	

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