

L08000023225

Florida Department of State  
Division of Corporations  
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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

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TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

PERFECT STITCH, L.L.C.

Certificate of Status	0
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Corporate Filing Menu

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February 29, 2008

EMPIRE CORPORATE KIT COMPANY

SUBJECT: PERFECT STITCH, L.L.C.  
REF: W08000010631

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P97000037920.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please

850-617-6381

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Florida Dept of State

call (850) 245-6097.

Marsha Thomas  
Regulatory Specialist II

FAX Aud. #: H08000052627  
Letter Number: 608A00012691

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
Trophy Stitch, Limited Liability Company**

**ARTICLE I**

The name of this Limited Liability Company shall be: **Trophy Stitch, Limited Liability Company**

**ARTICLE II**

The Limited Liability Company shall exist for a period of thirty years.

**ARTICLE III**

This Limited Liability Company is created for any lawful business purpose, except that special statutes for the regulation and control of specific types of business shall control when in conflict herewith.

The members may continue the business of this Limited Liability Company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member.

**ARTICLE IV**

The place of business and mailing address of this Limited Liability Company shall be 7001 West 20<sup>th</sup> Avenue, Hialeah, Florida, 33014, and such other place or places as the members from time to time may determine.

The initial registered agent of the Limited Liability Company shall be John M. Rodriguez.

The initial registered office address shall be 7600 West 20<sup>th</sup> Avenue, Suite 220, Hialeah, Florida 33016.

**ARTICLE V**

The member(s) of this Limited Liability Company, and their respective membership shares are:

Warren Kaplan	50 %
Anthony Mendez	50%

**ARTICLE VI**

The Limited Liability Company will be managed by two managers. The initial managers shall be: Warren Kaplan and Anthony Mendez. Their address is:

H08000052627

Warren Kaplan  
975 West 22<sup>nd</sup> Street  
Hialeah, Florida 33010

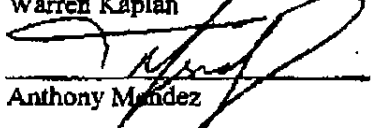
Anthony Mendez  
7001 West 20<sup>th</sup> Avenue  
Hialeah, Florida 33014

**ARTICLE VII**

The Limited Liability Company does hereby indemnify its Managers for any of their conduct on behalf of or related to their duties as Managers of the Limited Liability Company and holds them harmless for any acts on behalf of or in connection with their services for the Limited Liability Company.

IN WITNESS WHEREOF, THE PARTIES HERETO HAVE EXECUTED THESE ARTICLES OF ORGANIZATION.

  
\_\_\_\_\_  
Warren Kaplan

  
\_\_\_\_\_  
Anthony Mendez

STATE OF FLORIDA                     )  
   ) SS:  
COUNTY OF MIAMI-DADE             )

The foregoing instrument was acknowledged before me this 3<sup>rd</sup> day of MARCH, 2008, by Warren Kaplan and Anthony Mendez who have personally appeared before me, who are personally known to me, and who did take an oath.

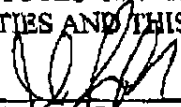
  
\_\_\_\_\_  
NOTARY PUBLIC, STATE OF FLORIDA  
Print Name: ANNA GARCIA

NOTARY PUBLIC-STATE OF FLORIDA  
Anna E. Garcia  
Commission #DD693213  
Expires: AUG. 26, 2011  
DESIGNED BY ATLANTIC BONDING CO., INC.

H08000052627

**WRITTEN ACCEPTANCE BY AGENT**


HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY, AT THE REGISTERED OFFICE DESIGNATED IN THE CERTIFICATE SET FORTH ABOVE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER STATE THAT I AM FAMILIAR WITH AND ACCEPT AND AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPERTY AND COMPLETE PERFORMANCE OF MY DUTIES AND THIS POSITION.

  
John M. Rodriguez  
AS REGISTERED AGENT FOR  
TROPHY STITCH, Limited Liability Company

STATE OF FLORIDA                    )  
  ) SS  
COUNTY OF MIAMI-DADE         )

The foregoing instrument was acknowledged before me this 3<sup>rd</sup> day of MARCH, 2008, by John M. Rodriguez, who personally appeared before me, who is personally known to me, and who did taken an oath.

NOTARY PUBLIC-STATE OF FLORIDA  
Annia E. Garcia  
Commission #DD693213  
Expires: AUG. 26, 2011  
BONDED THRU ATLANTIC BONDING CO., INC.

  
NOTARY PUBLIC, STATE OF FLORIDA  
Print Name: ANNIA GARCIA

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