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EXAMINER

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. ELFI L'ATELIER ST-TROPEZ  
(Corporation Name) (Document #)
2. MIAMI, LLC  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☒ Limited Liability  
☒ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

**ARTICLES OF ORGANIZATION**  
**OF**  
**ELFI L'ATELIER ST-TROPEZ MIAMI, LLC**

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**ARTICLE I - NAME**

The name of this limited liability company is **Elfi L'atelier St-Tropez Miami, LLC** (hereinafter "the Company").

**ARTICLE II - ADDRESS**

The mailing address and principal office is:

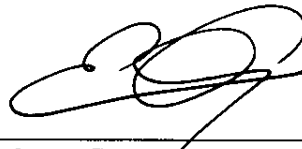
**2701 South Bayshore Drive  
Suite #402  
Miami, Fl. 33133**

**ARTICLE III : INITIAL REGISTERED OFFICE AND AGENT**

The name and mailing address of the initial registered office and the initial registered agent of the Company is:

**Elfi Salaun  
2701 South Bayshore Drive  
Suite #402  
Miami, Fl. 33133**

Having been named as registered agent and to accept service of process for the above state 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.



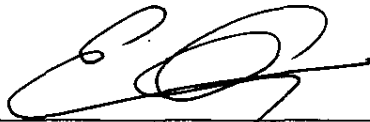
**Elfi Salaun- Registered Agent**

**ARTICLES IV - MANAGEMENT**

The Company will be managed by one (1) manager and is, therefore a manager-managed company.

**Elfi Salaun  
2701 South Bayshore Drive  
Suite #402  
Miami, Fl. 33133**

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

A handwritten signature in black ink, appearing to read 'Elfi Salaun', is written over a horizontal line.

**Elfi Salaun, Authorized Representative**

**ORGANIZER**

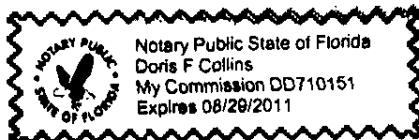
**IN WITNESS WHEREOF**, I have made and subscribed these Articles of Organization this 14th day of April 2008.


  
**MARCELLE POIRIER**

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

**I HEREBY CERTIFY** that on this day, personally appeared before me **MARCELLE POIRIER** who is well known to me to be the person described in and who executed these Articles of Organization as Organizer, and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

**SWORN TO AND SUBSCRIBED** before me this 14th of April 2008.



  
**NOTARY PUBLIC**  
**State of Florida at large**

My commission expires: