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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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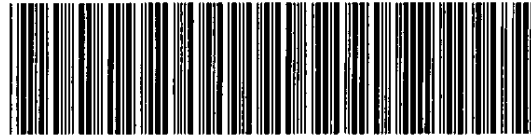
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 17 PM 4: 24

B. Tachost JUL 18 2008

TO: Registration Section

Division of Corporations

SUBJECT: Dolce Amici, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amanda Sawyer
Dolce Amici, LLC
10032 Cypress Shadow Avenue
Tampa, Florida 33647

For further information concerning this matter, please call:

Amanda Sawyer at (813) 758-8257

Enclosed is a check for \$125.00 for the Filing Fee.

ARTICLES OF ORGANIZATION

FOR

DOLCE AMICI, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 17 PM 4:24

ARTICLE I – NAME

The name of the Limited Liability Company is Dolce Amici, LLC.

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of Dolce Amici, LLC is:

Principal Office Address:

Dolce Amici, LLC
10032 Cypress Shadow Avenue
Tampa, Florida 33647

Mailing Address:

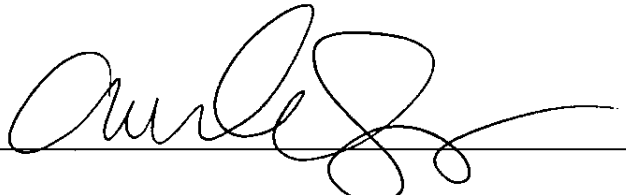
Dolce Amici, LLC
10032 Cypress Shadow Avenue
Tampa, Florida 33647

ARTICLE III – REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENTS SIGNATURE:

The name and the Florida street address of the registered agent are:

Amanda Sawyer
10032 Cypress Shadow Avenue
Tampa, Florida 33647

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 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.



Amanda Sawyer, Registered Agent

ARTICLE IV – MANAGING MEMBERS

The name and address of each Managing Member (MGRM) is as follows:

Title:

Name and Address:

MGRM

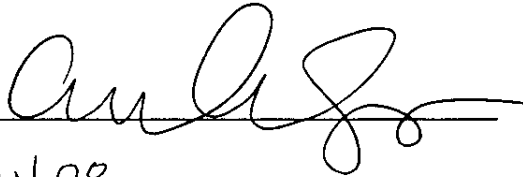
Amanda Sawyer
10032 Cypress Shadow Avenue
Tampa, Florida 33647

MGRM

Angie Quach
11319 Pocket Brook Drive
Tampa, Florida 33635

SIGNATURES OF MANAGING MEMBERS

Amanda Sawyer: _____



Date: _____

07/14/08

Angie Quach: _____



Date: _____

07/14/08

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.