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SECRETARY OF STATE
ALLAHASSEF F.

D. BRUCE

JAN 0 6 2009

EXAMINER

COVER LETTER

TO:	Registration S Division of Co						
SURI	ECT: Samn	ny's Small World, L	LC.				
50 5 0		(Name of Limite	ed Liability Comp	any)		-	
The e	nclosed Articles o	of Organization and fee(s) are	submitted for filin	ıg.			
Please	return all corres	pondence concerning this matt	er to the followin	g:			
	Gaby Elia	s Gadah					
			(Name of Person)			<u> </u>	
	-		(Firm/Company)				
	3631 Tall	evast Road				1747 135 160	2
			(Address)			CRET CAHA	
	Sarasota,	Florida 34243				N-5 TAR ASS	
		(Cit	y/State and Zip Cod	le)		PH PH PH	
For fu	rther information	concerning this matter, please	e call:			1 3: 40 STATE	Ö
Gat	y Gadah		at (941	, 376-422	9	<u> </u>	
	(Nam	e of Person)		de & Daytime Tele	ephone Number)	_	
Enclo	sed is a check f	or the following amount:					
\$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filis Certified Co (additional cop		\$160.00 Filing Certificate of St Certified Copy (additional copy is	tatus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton I 2661 Ex	Courier Address tion Section of Corporations Building secutive Center Cosee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Sammy's Small World LLC. (Must end with the words "Limited")	d Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
3631 Tallevast Road Sarasota, Florida 34243	3631 Tallevast Road Sarasota, Fiorida 34243			
	stered Office, & Registered Agent's Signature: n Registered Agent. You must designate an individual or another of the registered agent are:			
Gaby Gadah —	GADAH EMERPLISES INC. POS OF F			
1	Name FORD Road			
3631 Tallevast Road				
Florida stro	reet address (P.O. Box NOT acceptable)			
Sarasota	FL 34243			
City, 9	State, and Zip			

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, F.S..

Registered Agent's Signature (REOUIRED)

FEFECTIVE DATE 0/02/09 (CONTINUED)
Page 1 of 2

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Elias G. Gadah
	6918 Magellan Way
	Sarasota, Florida 34243
MGRM	Samira M. Gadah
	6918 Magellan Way
	Sarasota, Florida 34243
MER MGRM	Gaby Gadah
	6950 Magellan Way
	Sarasota, Florida 34243
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: <u>January 2, 2009</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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.)

Gaby Gadah

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)