

LD9UUUU 90347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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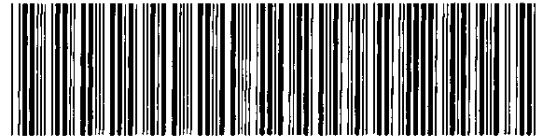
(Business Entity Name)

(Document Number)

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September 18, 2009

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Sunrise Jewels LLC

Filing Evidence

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

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NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

Articles of Organization for Florida Limited Liability Company

Article I - Name:

The Name of the Limited Liability Company is: Sunrise Jewels, LLC

Article II- Address:

The mailing address and street address of the principle office of the Limited Liability Company is:

Principle Office Address:

7993 NW 21st St.
Miami, Florida 33122

Mailing Address:

7993 NW 21st St.
Miami, Florida 33122

Article III - Registered Agent, Registered Office, & Registered Agents Signature:

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

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

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 provision 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..

Lamont W. Jones, Assistant VP

Lamont W. Jones
Registered Agent's Signature

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Article IV – Managing Members:

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

<u>Title</u>	<u>Name and Address:</u>
MGRM	Pablo Ramirez 7993 NW 21 st St. Miami, Florida 33122

Article V: Effective date, if other than the date of filing: _____.(Optional)

REQUIRED SIGNATURE:


Amanda J. Beren, Organizer