

**0900099633**

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## To:

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## From:

Account Name : FILINGS, INC.  
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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**  
**SILVER STITCH, LLC**

Certificate of Status	0
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**M. THOMAS**

OCT 16 2009

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**ARTICLES OF ORGANIZATION  
OF  
SILVER STITCH, L.L.C**

**ARTICLE I        NAME**

The name of the limited liability company shall be: **SILVER STITCH, LLC**

**ARTICLE II        PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: **5500 Collins Avenue, PH II, Miami Beach, Florida 33140.**

**ARTICLE III        INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: **HOWARD N. GALBUT, P.A., 2650 Biscayne Boulevard, Miami, Florida 33137. Located in the County of Miami-Dade.**

**ARTICLE IV        DURATION**

The duration for the limited liability company shall be: **12/31/2045.**

**ARTICLE V        MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

**LIBBY COMRAS, 5500 Collins Avenue, PH I, Miami Beach, Florida 33140.**



**LIBBY COMRAS, Incorporated, Organizer  
Prepared by Libby Galbut,  
5500 Collins Ave. PH-I  
Miami Beach, Florida 33140  
(305) 868-7080**

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**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **SILVER STITCH, L.L.C**

The name and address of the registered agent and office is **HOWARD N. GALBUT, P.A., 2650 Biscayne Boulevard, Second Floor, Miami, Florida 33137**. Located in the County of Miami-Dade.

Having been named as Registered Agent and to accept service of process for the above stated 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.

Signature:

  
Howard N. Galbut, P.A.

Dated:

10/19/09

11/9/09 22/13/14