

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000039978 3)))



H100000399783ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
 Account Number : I20000000019
 Phone : (305) 552-5973
 Fax Number : (305) 220-1440

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

FLORIDA/FOREIGN LIMITED LIABILITY CO.**FAJAS DEPOT LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

G. MCLEOD

Electronic Filing Menu

Corporate Filing Menu

Help

EXAMINER

FEB 23 2010

RECEIVED

10 FEB 22 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 FEB 22 AM 8:51

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

H10000039978

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Fajas Depot LLC

(Must end with the words "Limited 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:7931 SW 40th Street
Suite #38
Miami FL 33155Mailing Address:7931 SW 40th Street
Suite #38
Miami FL 33155

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Margarita Chemenidia
Name7931 SW 40th Street Suite #38 Miami FL 33155
Florida street address (P.O. Box NOT acceptable)Miami Florida FL 33155
City, 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.

Margarita Chemenidia
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H10000039978

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 FEB 22 AM 8:51

H10000039978

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM**Name and Address:**Margarita Chemendia.
7931 SW 40th Street
Suite #38 Miami FL 33155

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:Margarita Chemendia
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.)

Margarita Chemendia
Typed or printed name of signer**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)

H10000039978