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EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations SUBJECT: ELITE AFFAIRS EVENT PLANNING, LIMITED LIABILITY COMPANY Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: ERICA RETEVIA SCRIVENS Name of Person ELITE AFFAIRS EVENT PLANNING, Firm/Company 13735 C SW 84th STREET Address MIAMI, FLORIDA 33183 City/State and Zip Code ESCRIVEN2009@COMCAST_NET

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ERICA SCRIVENS _) <u>287-6314</u> Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: ■\$125.00 Filing Fee **\$**\$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ELITE AFFAIRS EVENT PLANNING, 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

Principal Office Address:

Mailing Address:

13735 C SW 84th STREET
MIAMI, FL 33183

13735 C SW 84th STREET MIAMI, FL 33183

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:

ERICA SCRIVENS

Name

13735 C SW 84th STREET

Florida street address (P.O. Box NOT acceptable)

MIAMI

гі. 33183

FL 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..

Registered Agent's Signature (REQUIRED)

Page 1 of 2 (CONTINUED)

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

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

Title: "MGR" = Manager	Name and Address:	1 SECOND
"MGRM" = Managing Member		10FEB 22 ALLAHASSEE
MGR	ERICA SCRIVENS	SEE O
	13735 C SW 84th STREET	TIG F
	MIAMI, FL 33183	9E 'S
		DE L
		
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(Use attachment if necessary)		All the second s
LEV: Effective date if other than the d	ACCE NAROU 1 2010	(OPTIONAL)

ARTICLE V: Effective date, if other than the date of filing: MARCH 1, 2010 (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.)

ERICA SCRIVENS

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)

S 5.00 Certificate of Status (Optional)