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Effective Date 07/04/10

SECRETARY OF STATE ORATIONS
10 JUN 11 AM IN 44

T. HAMPTON JUN 1 4 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
		•		
SUBJE	CT: EYECA	SH.COM, LLC	11.124 0	
		Name of Limit	ed Liability Company	
The enc	losed Articles o	f Organization and fee(s) are	submitted for filing.	
Please r	eturn all corresp	ondence concerning this mat	ter to the following:	
,	JOSE R. EST	EFANO		
-			Name of Person	
<u>_</u>	EYECASH.C	ОМ		
			Firm/Company	
<u> </u>	251 SW 47TH	IAVE		
			Address	
ı	MIAMI, FLOR	IDA, 33134		
_		Cit	y/State and Zip Code	
j	estefano@sn			
_		E-mail address: (to be used	for future annual report notification)	
For furti	her information	concerning this matter, please	e call:	
Jose F	R. Estefano		at (786) 338-1752	
	Name	of Person	Area Code & Daytime Telephor	ne Number
Enclose	ed is a check for	or the following amount:		
□\$125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy C (additional copy is enclosed) C	60.00 Filing Fee, ertificate of Status & ertified 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 Circl Tallahassee, FL 32301	le

Effective Date 07/04/10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	any is:		
EYECASH.COM, LLC			
	ed Liability Company, "L.L.C.," or "Ll.C.")		
ARTICLE II - Address:			
	the principal office of the Limited Liability Company is:		
-			
Principal Office Address:	Mailing Address:		
251 SW 47TH AVE	251 SW 47TH AVE		
MIAMI, FLORIDA, 33134	MIAMI, FLORIDA, 33134		
	stered Office, & Registered Agent's Signature: m Registered Agent. You must designate an individual or another of the registered agent are:		
Jose R. Estefano			
Jose N. Esterano	Name		
251 SW 47TH AVE			
Florida st	Florida street address (P.O. Box NOT acceptable)		
MIAMI,	_{FL} ,33134		
	City, State, and Zip		
liability company at the place designat	and to accept service of process for the above stated limited led in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all		

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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..

SECRETARY OF STATE DIVISION OF CORPORATIONS

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Men	nber
MGR	JOSE R. ESTEFANO
	•
(Use attachment if necessary	у)
ICLE V: Effective date, if other effective date is listed, the date 90 days after the date of filing	er than the date of filing: JULY 4TH, 2010 . (OPTIONAL) te must be specific and cannot be more than five business days prig.)
<u>required</u> signatûri	E:
	January (
Signature of	or a member or an authorized representative of a member.
of this docu	th section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury at stated herein arc true.)

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)

Jose R. Estefano

Typed or printed name of signee