

L1000000 74085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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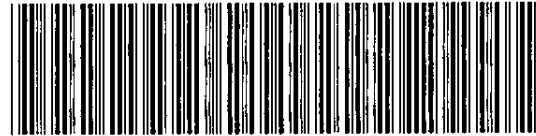
(Business Entity Name)

(Document Number)

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B. KOHR

JUL 14 2010

EXAMINER

FILED
10 JUL 14 AM 11:17
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ECTS

EXPRESS CORPORATE FILING SERVICE, INC
1000 PONCE DE LEON BLVD., STE: 101
CORAL GABLES, FL 33134
PH: (305)444-4994 FAX: (305)444-4977

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SECRETARY OF CORPORATIONS
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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. The Narsha Group, LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

EFFECTIVE DATE 7/13/2010

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF

THE NARSHA GROUP, LLC

ARTICLE I - NAME

The name of the Limited Liability Company is

THE NARSHA GROUP, LLC

Effective date July 13, 2010

ARTICLE II - ADDRESS

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

Mailing Address:
555 NE 15 Street
Miami, FL 33132

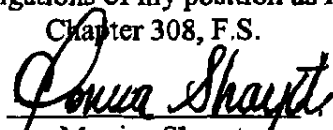
Principal Address:
555 NE 15 Street
Miami, FL 33132

ARTICLE III - REGISTERED AGENT & REGISTERED AGENT'S SIGNATURE

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

Monica Shayet
555 NE 15 Street
Miami, FL 33132

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 308, F.S.


Monica Shayet

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DIVISION OF CORPORATIONS
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ARTICLE IV - MANAGER

The name and the Florida street address of the managers or managing member is:

MGR:

Jorge Toledano
555 NE 15 Street
Miami, FL 33132

MGR:

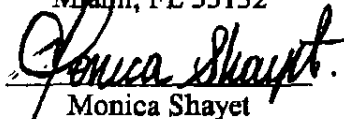
Bruno Halimi
555 NE 15 Street
Miami, FL 33132

MGR:

Luis Felipe Naranjo
555 NE 15 Street
Miami, FL 33132

MGR:

Monica Shayet
555 NE 15 Street
Miami, FL 33132


Monica Shayet

(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.)