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.

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:QT

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: PROFESSIONAL SERVICES

Account Number: I20040000024

Phone

: (305)445-2055

Fax Number : (305)403-1061

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

FLORIDA LIMITED LIABILITY CO. LUXURY EYEWEAR GROUP LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

J. SAULSBERRY EXAMINER

JAN 25 2011

EAWOEDIES OF FR-BANIOS ESOLEA

ATTORNEY AT LAW

Javier Baños, Esq

A PROFESSIONAL ASSOCIATION 3400 Coral Way, Suite 601 Miami, FL 33145

Tel. (305) 519-5581 Fax (305) 446-3444 jbanos@msn.com

Monday, 01/24/2011

Division of Corporation State of Florida Tallahassee, Florida

Re: Attached filing for LUXURY EYERWEAR LLC

Sirs:

Please find attached, Article of Incorporation for above LLC, which happens to have a similar name to Luxury Eyewear Inc, also a Florida Corporation.

Please note that the individuals involved are the same, and the sole shareholder and member is the same in both cases, Primo D Marmolejos; who below is authorizing the use of the similar name Luxury Eyewear by the new LLC, which is also his

I trust this will allow the Division to permit the new LLC top have a similar name.

Please let me know if I can assist you further. Contact me at (305) 519-5581.

Very truly yours,

Javier Baños, Esq.

I Primo D Marmolejos, do acknowledge and authorize the Division of Corporations for the State of Florida, to have Luxury Eyewear group, LLC created to operate in Florida

Primo D Marmolejos

3126 CORAL WAY MIAMI, FL 33145

(305) 519-5581 (305) 403-1061

COVER LETTER

	ation Section of Corporations		
SUBJECT: LU	JXURY EYEWEAR G	ROUP LLC	
		d Liability Company	
			Size 3
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all	correspondence concerning this matte	er to the following:	2011 JAN 24
Javie	r Banos, Esq		
		Name of Person	77.7
		Firm/Company	3
3126	CORAL WAY, Miami,	FL 33145	
		Address	
MIAMI	, FL 33145		
		/State and Zip Code	
INFO@	PROSUS.NET	or future annual report notification)	
	. ,		
For further infor	mation concerning this matter, please	call:	
JAVIER BA	NOS ESQ	at (786) 303-5010	
	Name of Person	Area Code & Daytime Telephone Nur	mber
Enclosed is a ci	heck for the following amount:		
\$125.00 Filing F	Fee 130.00 Filing Fee & Certificate of Status	Certified Copy Certifi (additional copy is enclosed) Certifi	00 Filing Fee, cate of Status & led Copy on long 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:

LUXURY EYEWEAR GROUP 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:	Mailing Address:	2011 786	
1005 NW 114 AVENUE	SAME	JAN	16
SUITE 8			
OORAL, FLORIDA 33178-4372		<u> </u>	-
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	on Registered Agent. You must designate an inc	t's Signature:	
The name and the Florida street address of	of the registered agent are:	•	
PRIMO D MARM	OLEJOS		
	Name		

Florida street address (P.O. Box NOT acceptable) MIAMI. FL 33145 City, State, and Zip

3128 CORAL WAY

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..

ature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mem	Name and Address:	•
MGRM	PRIMO D MARMOLEJOS	
	3128 CORAL WAY	
	MIAMI, FL 33145	
MGRM	ROSALIA SALADIN	JAN 24
•	3128 CORAL WAY	57.20
	MIAMI, FL 33145	[2]
•		E FLORIDA
		95
	Nation of the latest statement	
	· · · · · · · · · · · · · · · · · · ·	
/T1		
(Use attachment if necessary)	
TEV: Effective data if other	than the date of filing:	(OPTIONAL)
	E Drust de suecinc and cadidol de mole man	
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ffective date is listed, the date date of filing. REOUIRED SIGNATURE)	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

PRIMO D MARMOLEJOS

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2

Typed or printed name of signee