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Certificates of Status	5
s to Filing Officer:	
	(Business Entity Name) (Document Number) Certificates of Status

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SECULIARISE SINGS

C. LEWIS

JUN 2 8 2011

EXAMINER

COVER LETTER

Registration Section Division of Corporations

ECT: Aromas Factory, LLC Name of Limited Liability Company he enclosed Articles of Organization and fee(s) are submitted for filing. ise return all correspondence concerning this matter to the following: Fania Montenegro Name of Person Aromas Factory, LLC Firm/Company 545 Trace Circle #211 Address Deerfield Beach, FL 33441 City/State and Zip Code info@aromas-usa.com E-mail address: (to be used for future annual report notification) or further information concerning this matter, please call: Fania Montenegro at (954) 480-6316 Area Code & Daytime Telephone Number Name of Person 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 Certificate of Status & Certified Copy (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:

Aromas Factory, 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:

545 Trace Circle #211

Deerfield Beach, FL 33441

545 Trace Circle #211 Deerfield Beach, FL 33441

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:

Fania Montenegro

Name

545 Trace Circle #211

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

Deerfield Beach

FL 33441

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)

(CONTINUED)

Page 1 of 2

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	and the second s		
	ARTICLE IV- Manager(s) or Man	naging Member(s):	300
	The name and address of each Manager or Managing Member is as follows:		2011 JUN 27 PM 16
	Title:	Name and Address:	MECAHASSEE FEORIL
	"MGR" = Manager	THE STATE OF THE S	MULAHASSEE
	"MGRM" = Managing Member		ייי בייי ניטאון
	MGR	Fania Montenegro	
	,	Talla Molliologic	
			
The stage			
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	(Use attachment if necessary)		
ARTI	CLE V: Effective date, if other than the	e date of filing: 07/01/2011	(OPTIONAL)
		e specific and cannot be more than five	business days prior
to or 9	00 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Fania Montenegro

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)
\$ 5.00 Certificate of Status (Optional)