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FLORIDA LIMITED LIABILITY CO.
EMILIO CRAIG NYC, LLC

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EXAMINER

7-11000223075-3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

EMILIO CRAIG NYC, LLC

ARTICLE II ADDRESS

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

2950 ASHAND LANE S
KISSIMMEE, FLORIDA 34743

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

EMIL TORRES
2950 ASHAND LANE S
KISSIMMEE, FLORIDA 34743

Having been named as registered agent 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.

X Emil Torres
EMIL TORRES / Registered Agent's signature

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PAGE 2 EMILIO CRAIG NYC, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

EMIL TORRES

2950 ASHAND LANE S

KISSIMMEE, FLORIDA 34743

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.....
X Emil Torres
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.)

EMIL TORRES

4-11000223075-3.