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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: NATOUR TRADING INTERNATIONAL, LLC	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
SAMI NATOUR	
Name of Person	•
NATOUR TRADING INTERNATIONAL	
Firm/Company	-
5071 WEST OAKLAND PARK BLVD, #103	_
Address	=
FORT LAUDERDALE, FL 33313	D C T ,
City/State and Zip Code	3
SAMIN2JC@AOL.COM	2
E-mail address: (to be used for future annual report notification)	<u> </u>
For further information concerning this matter, please call:) }
SAMI NATOUR at (954) 918-8655	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times 130.00 Filing Fee \$\times 155.00 Filing Fee \$\times 160.00 Filing Fee, 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:

NATOUR TRADING INTERNATIONAL, 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:
5071 WEST OAKLAND PARK BLVD #103 33313	P.O. BOX 8223 FORT LAUDERDALE , FL 333310
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another
SAMI NATOUR	
Name	
5071 WEST OAK	
Florida street add	ress (P.O. Box NOT acceptable)
FORT LAUDERDALE	_{FL} 33313
City, Sta	te, 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

EFFECTIVE DATE 10 01 11

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

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

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	SAMI NATOUR
	5071 WEST OAKLAND PARK BLVD
	#103 FORT LAUDERDALE, FLORIDA

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(Use attachment if necessary)	
(Use attachment if necessary)	
CLE V: Effective date, if other than	the date of filing: OCTOBER 1, 20 [(OPTIONAL)
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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)