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Fax Number : (850) 617-6383.

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

: (305)634-3694

Fax Number

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FLORIDA LIMITED LIABILITY CO. NATALIE JEWELRY INTERNATIONAL, LLC

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10/12/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		HIVOO	0247028
The name of the Limite	ed Liability Company is:	. , , , , , , , , , , , , , , , , , , ,	
NATA	LIE JEWELRY INTERNATIO	DNAL, LLC	
(Must end	d with the words "Limited Liability	Company, "L.L.C.," or "LLC.")	<u>,,</u>
ARTICLE II - Addres	DD.*		
··	d street address of the princ	cipal office of the Limite	d Liability Company is
		*	
Principal Office Addr	ess:	Mailing Address:	
1822 NW 22nd Street	1	1822 NW 22nd Street	
Miami, FL. 33142		Miami, FL 33142	
· · · · · · · · · · · · · · · · · · ·			
business entity with an active. The name and the Florid	da street address of the regi	J	AL.
	Name	•	1 OCT 12 LAHASSEE
	1822 NW 22nd 9	Street	ASS ASS
	Florida street address	s (P.O. Box NOT acceptable)	E S P
	Mlami, F	լ33142	F SI D
	City, State,	and Zip	20 RID
			the above several limiters
registered agent and ag statutes relating to the	registered agent and to acc the place designated in this tree to act in this capacity. It proper and complete performs of my position as register	certificate, I hereby accept further agree to comply r rmance of my duties, and	ot the appointment as with the provisions of a I am familiar with and
registered agent and ag statutes relating to the	the place designated in this tree to act in this capacity. It proper and complete perfo	certificate, I hereby accept further agree to comply r rmance of my duties, and	ot the appointment as with the provisions of a I am familiar with and
registered agent and ag statutes relating to the	the place designated in this tree to act in this capacity. It proper and complete performs of my position as register	certificate, I hereby accept further agree to comply rmance of my duties, and red agent as provided for the complex of the com	ot the appointment as with the provisions of a I am familiar with and

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EMPIRE CORP KIT

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	Name and Address:
'MGR" = Manager	
"MGRM" = Managing Member	•
MGRM	RUBIN, Jose A.
	1822 NW 22nd Street
	Miami. FL. 33142
EV: Effective date, if other than t	the date of filing: 10-12-20// (OPTIO
	the date of filing: <u>/0-/2-20//</u> . (OPTIO t be specific and cannot be more than five business o
EV: Effective date, if other than tective date is listed, the date must days after the date of filing.)	· · · · · · · · · · · · · · · · · · ·
EV: Effective date, if other than tective date is listed, the date must lays after the date of filing.) REQUIRED SIGNATURE:	t be specific and cannot be more than five business
EV: Effective date, if other than the ective date is listed, the date must lays after the date of filing.) REOUIRED SIGNATURE: Signature of a men (In accordance with section to constitutes an affirmation under I am aware that any false information constitutes any false information under I am aware that	t be specific and cannot be more than five business of
LE V: Effective date, if other than the date is listed, the date must days after the date of filing.) REOUIRED SIGNATURE: Signature of a men of the date of the	aber or an authorized representative of a member. 508.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of Stateony as provided for in s.817.155, F.S.)
EV: Effective date, if other than the ective date is listed, the date must lays after the date of filing.) REOUIRED SIGNATURE: Signature of a men of the ection of the constitutes an affirmation under that any false information constitutes a third degree felories.	aber or an authorized representative of a member. 508.408(3), Florida Statutes, the execution of this document of the penaltics of perjury that the facts stated herein are true, formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.)