

07/27/2012

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Division of Corporations

Florida Department of State  
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## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : NUNCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

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

Email Address: KevinReed1212@yahoo.com

FLORIDA LIMITED LIABILITY CO.  
LLC At Helene's Vintage Armoire LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **LLC At Helene's Vintage Armoire 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:

2490 Griffin Road

2490 Griffin Road

Dania Beach, FL 33004

Dania Beach, FL 33004

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Kevin Reed

Name

14715 Mahogany Court

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Miami Lakes, FL 33014

(City / State / 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 - Kevin Reed

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

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

**Title:**

**Name and Address:**

"MGR" = Manager

"MGRM" = Managing Member

MGRM

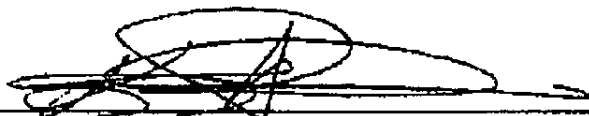
Kevin Reed - 14715 Mahogany Court, Miami Lakes, FL 33014

MGRM

Joseph A. Morin - 8381 SW 39th Court, Davie, FL 33328

(Use attachment if necessary)

**REQUIRED SIGNATURE:**



Signature of a member or 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.)

Kevin Reed

Typed or printed name of signee

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