Florida Department of State

Division of Corporations Electronic Filing Cover Sheet



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000228005 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

 \mathbb{T}_{Q} :

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVIC

Account Number: 075350000353

: (212)431-5000

Fax Number

: (212)431-1441

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

Email	Address

FLORIDA LIMITED LIABILITY CO.

Tommypletro, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

T. CLINE

SEP 1 8 2012

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Tommypietro, LLC

ARTICLE II - Address:

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

Principal Office/Mailing Address:

C/o Palmetto, Mollo Et al, 91Broadhollow Rd., Melville, NY 11747

ARTICLE III - Registered Agent

Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> BlumbergExcelsior Corporate Services, Inc. 155 Office Plaza Drive, 1st Fl. Tallahassee, FL 32301

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 iff Chapter 608, F.S..

Registered Agent's Signature Jose Mojica, Assistant Secretary

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

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

Tommaso Bagon, 82 Strada Moiarano, Acqui Terme, Italy, 15011 Pietro Bagon, 82 Strada Moiarano, Acqui Terme, Italy, 15011 Donatella Pizzala, 82 Strada Moiarano, Acqui Terme, Italy, 15011

Yvelisse Oruz, Organizer

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.)