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.

(((H12000283052 3)))



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

| To: | Division of Co | rporations D | 2812 |
|-------|----------------|------------------------------------------|---------|
| | Fax Number | : (850) 617-6383 | DEC |
| From: | | 第5 | င်္ |
| | Account Name | : LAZARUS CORPORATE FILING SERVICE, INC. | ω |
| | Account Number | : I2000000019 | Acres 1 |
| | Phone | : (305) 552-5973 | |
| | Fax Number | | ה הל |

| Email | Address: | : | | | |
|-------|----------|---|--|------|---|
| | | | | | _ |

FLORIDA LIMITED LIABILITY CO. FOUR GIRLS INVESTMENTS GROUP LLC

Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$130.00

A. LUNT

DEC -4 2012

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

H12000283052

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Four Girls Investor | ients Group LLC FE | 2812 |
|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------|
| (Must end with the words "L | imited Liability Company, "L.L.C.," or "LLC.") | 周 |
| ARTICLE U - Address: The mailing address and street address | s of the principal office of the Limited Liability Gompa | ω Iny is: |
| Principal Office Address: | Mailing Address: | |
| 8770 9052 ST MIAMIL FL 33165 | | 沙 河 河 |
| (The Limited Liability Company cannot serve as | Registered Office, & Registered Agent's Signature: | |
| business entity with an active Florida registratio The name and the Florida street addresses | | |
| The name and the Florida street addr | ess of the registered agent are: | |
| | | |
| The name and the Florida street addr | ess of the registered agent are: | |
| The name and the Florida street address Elizabeth 8770 56 | Baltodano Name | |
| The name and the Florida street address Elizabeth 8770 St | Paltodano Name 3 5 3 ST ida street address (P.O. Box NOT acceptable) | |
| The name and the Florida street address Elizabeth 8770 56 | Baltodano Name | |

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED) Page 1 of 2

· H12000283052

H12000283052

| <u> Fitle:</u> | Name and Address: | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| "MGR" = Manager | | رج ا |
| "MGRM" = Managing Member | (9) | 🚉 င်္သ |
| :001 G to 0 | | ci ane |
| MGRM | Elizabeth Baltodano zi | 亚 |
| | 8770 Su 5> 51 9 | |
| ٠ | MIAMI, FL 33165 | |
| MGRM | Allan E. Baltodano | |
| | 8770 SW 52 St | |
| | Miami, FL 33165 | |
| | | |
| | | |
| | | |
| | | |
| • | | |
| | | |
| | | - |
| | | |
| | | |
| Use attachment if necessary) | | |
| (Use attachment if necessary) LE V: Effective date, if other that | m the date of filing: | PTIONA |
| EV: Effective date, if other that | | PTIONA |
| LE V: Effective date, if other the fective date is listed, the date m | on the date of filing: (Oust be specific and cannot be more than five bus | |
| LE V: Effective date, if other that fective date is listed, the date m | | |
| LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) | | |
| LE V: Effective date, if other the fective date is listed, the date m | | |
| LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) | | |
| LE V: Effective date, if other that lective date is listed, the date m days after the date of filing.) | | |
| LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REQUIRED SIGNATURE: | | |
| LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REOUIRED SIGNATURE: Signature of a n | ust be specific and cannot be more than five bus Maltoslans nember or an authorized representative of a member. | |
| LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REOUIRED SIGNATURE: Signature of a n (In accordance wof this document | Latto Law Description and cannot be more than five bus the specific and cannot be more than five bus a substitute of a member. The section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury | |
| LE V: Effective date, if other that fective date is listed, the date m days after the date of filing.) REOUIRED SIGNATURE: Signature of a n (In accordance wof this document | The specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be specific and statutes are specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be more than five bus the specific and cannot be specifically and cannot be specific an | |

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Page 2 of 2