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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	·
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SEURETARY OF STATE
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## **COVER LETTER**

TO:		istratio ision of		ection rporations							
		TRE	vi G	Group, LLC							
SUBJ	ECT:			Name of Limit	ed Liability Co	omp	any		· —	-	
The en	closec	l Article	s of	Organization and fee(s) are	submitted for f	filin	g.				
Please	return	all com	resp	ondence concerning this man	ter to the follow	wing	<b>ç</b> ;				
	Jos	h Steii	n								
				, , , , , , , , , , , , , , , , , , ,	Name of Perso						
	Cia	o Bella	a M	arketing		_					
					Firm/Company			<del></del>	<u> </u>	201	
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	150	O WIICI	<u>.</u>	an Ave. Suite 6					IAS.	<b>⊅o</b> 	
				_	Address				SEE	7 [	 
	Mia	mi Be	ach	n, FL 33139					FL(	P# I	
	! !-	@ .:			ty/State and Zip	Cod	le	<u>, , , , , , , , , , , , , , , , , , , </u>	33 A	20	•
	josn	@ciac	obe	llamarketing.com		<del></del>			76	<u> </u>	
				E-mail address: (to be used		li rep	ort notification)				
For fu	rther i	nformati	ion (	concerning this matter, please	e call:						
Alex	ande	r Augi	usti	in	305		705-5000				
		Na	ıme -	of Person	at ( Area	Cod	le & Daytime Tele	phone Num	ber	-	
P. 1	, .	. 1		and Callenda							
				or the following amount:			_	_			
<b>■</b> \$125	.00 F	iling Fe	ee	U\$130.00 Filing Fee & Certificate of Status	Certified	d Co	_	Certifie	ate of St d Copy		
				Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	Regi Divi Clift	istra isior ton l	Courier Address tion Section to of Corporation Building	s			

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
TREM Group, LLC		
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
	ne principal office of the Limited Liability Company i	s:
Principal Office Address:	Mailing Address:	
3427 Main Highway	3427 Main Highway	
Coconut Grove, FL 33133	Coconut Grove, FL 33133	
business entity with an active Florida registration.)  The name and the Florida street address of a Joshua Stein	>	TO TO
1500 Michigan Ave. A	et address (P.O. Box NOT acceptable)	T
Miami Beach, FL 331	30 55 4.	フ
Cit	ry, State, and Zip	
liability company at the place designated registered agent and agree to act in this call statutes relating to the proper and con	d to accept service of process for the above stated limit d in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of applete performance of my duties, and I am familiar with as registered agent as provided for in Chapter 608, F.S.	of h

Page 1 of 2

(CONTINUED)

Registered

gent's Signature (REQUIRED)

Title:	Name and Address:
"MGR" = Manager	Lan
"MGRM" = Managing Memi	
MGRM	Ciao Bella Marketing
	1500 Michigan Ave Suite 6
	Miami Beach, FL 33139
MGRM	DGT Alliance
IVIDALIVI	2427 Main Highway
	Coconut Grove, FL 33133
	ATE 20
(Use attachment if necessary	r than the date of filing: (OPTIONA
CLE V: Effective date, if othe effective date is listed, the do or 90 days after the date of	r than the date of filing: (OPTIONA ate must be specific and cannot be more than five business filing.)
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CLE V: Effective date, if other effective date is listed, the door 90 days after the date of REQUIRED SIGNATURE  Signature of the date of	r than the date of filing: (OPTIONA ate must be specific and cannot be more than five busines filing.)  f a member of an authorized representative of a member.  section 608 408(3), Florida Statutes, the execution of this document atton under the penatties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State
CLE V: Effective date, if othe effective date is listed, the do or 90 days after the date of REQUIRED SIGNATURE  Signature of the date of	r than the date of filing:
CLE V: Effective date, if other effective date is listed, the door 90 days after the date of Signature of Clin accordance with a constitutes an affirm I am aware that any is constitutes a third de	r than the date of filing:
CLE V: Effective date, if othe effective date is listed, the do or 90 days after the date of REQUIRED SIGNATURE  Signature of the date of	r than the date of filing: (OPTIONA ate must be specific and cannot be more than five business filing.)  f a member of an authorized representative of a member.  section 608 408(3), Florida Statutes, the execution of this document action under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.)  Stein
CLE V: Effective date, if other effective date is listed, the door 90 days after the date of REQUIRED SIGNATURE  Signature of the date of	r than the date of filing:
CLE V: Effective date, if other effective date is listed, the door 90 days after the date of REQUIRED SIGNATURE  Signature of the date of	r than the date of filing:

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