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SECRETARY OF STATE
ALL AHASSEE FLORING

K. SALY EXAMINER

MAY - 6 2013

(850) 245-6051.

COVER LETTER

TO:	Registration Division of C				
SUBJE	:СТ:	ROCOUFT In 163 Name of Limi	therts LLC. ted Liability Company		
The end	closed Articles	of Organization and fee(s) are	submitted for filing.		
Please	return all corres	pondence concerning this mat	ter to the following:		
		Jean Aff	red Rocourt Name of Person		
		ROTOUF	TINJESTMENTS, LLC Firm/Company		
		62305W 78th S	 		
•			Address		
-	· · · · · · · · · · · · · · · · · · ·	South Miami, P	L 33143		
	South Miami, FL 33143 City/State and Zip Code				
_		E-mail address: (to be used	Oyahoo. (om for future annual report notification)		
For furt	her information	concerning this matter, please	e call:		
	Jean-	Alfred ROCOUTT	at (305) Coo 79 Area Code & Daytime Telep	88bhone Number	
Enclose	ed is a check f	or the following amount:			
\$ 125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	S-1-2013
Ro (OUFT ± nJe +m.) (Must end with the words "Limited Liabili	erts LLC. ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6230 S.W. 78th St South Higmi, FL 33143	6230 S.W 78th St South Migni, FL 33143
South Higmi, FL 33143	South Migmi, FL 33143
business entity with an active Florida registration.) The name and the Florida street address of the re Tean-Affra Name	
6230 SW. 78th	
	ress (P.O. Box <u>NOT</u> acceptable)
South Migni City, Stat	FL 33143 e, and Zip
liability company at the place designated in the registered agent and agree to act in this capacit all statutes relating to the proper and complete and accept the obligations of my position as reg	ccept service of process for the above stated limited as certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of performance of my duties, and I am familiar with sistered agent as provided for in Chapter 608, F.S
Registered Agent's Signatu	re (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:					
MGRM	Jean-Affred Rocourt 6230 S.W 78th St South Migmi, FL 33143					
(Lice attachment if pagescony)						
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing:						
REQUIRED SIGNATURE:						
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)						
	Afred Rocourt d or printed name of signee					

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)