Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO.

Downtown Convenience Store LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION

EL OD LD Y THA	FOR
ARTICLE I - Name	TED LIABILITY COMPANY
The name of the Limited Liability Company is: Down	town Convenience Store LLC
ARTICLE II - Address	
The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4300 N. Ocean Boulevard #9B	4300 N. Ocean Boulevard #9B
Fort Lauderdale, FL 33308	Fort Lauderdale, FL 33308
ARTICLE III - Registered Agent, Registere	d Office & Registered Agent's Signature
ARTICLE III - Registered Agent, Registere The name and Florida street address of the registered ag	
The name and Florida street address of the registered ag	gent are:
	gent are:
The name and Florida street address of the registered as Mark Hopkin	gent are:
The name and Florida street address of the registered as Mark Hopkin 4300 N. Oce	ns Name
The name and Florida street address of the registered ag Mark Hopkin 4300 N. Oce (P.O.	ns Name Pan Boulevard #98
The name and Florida street address of the registered ag Mark Hopkin 4300 N. Oce (P.O.	Name Name Pan Boulevard #9B Box or Mail Omp Box NOT Acceptable)
The name and Florida street address of the registered ag Mark Hopkin 4300 N. Oce (P.O. Fort Laudero Having been named as registered agent and to acce at the place designated in this certificate, I hereby a capacity. I further agree to comply with the provisto	gent are: Name Name ean Boulevard #9B Box or Mail Drop Box NOT Acceptable) date, FL 33308
The name and Florida street address of the registered ag Mark Hopkin 4300 N. Oce (P.O. Fort Laudero Having been named as registered agent and to accept the place designated in this certificate. I hereby a capacity. I further agree to comply with the provisio of my duties, and I am familiar with and accept the	Name Name Pan Boulevard #9B Box or Mail Orop Box NOT Acceptable) dale, FL 33308 (City / State / Zip) pt service of process for the above stated limited liability company accept the appointment as registered agent and agree to act in this cass of all statutes relating to the proper and complete performance
The name and Florida street address of the registered ag Mark Hopkin 4300 N. Oce (P.O. Fort Laudero Having been named as registered agent and to accept the place designated in this certificate. I hereby a capacity. I further agree to comply with the provisio of my duties, and I am familiar with and accept the	Name Pan Boulevard #9B Box or Mail Drop Box NOT Acceptable) Idale, FL 33308 (City / State / Zip) Pot service of process for the above stated limited liability company accept the appointment as registered agent and agree to act in this into of all statutes relating to the proper and complete performance abligations of my position as registered agent as provided for in

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

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The name and addres	ss of each Manager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" ≈ Managin	Name and Address:
MGRM	Mark Hopkins - 4300 N. Ocean Blvd. #9B. Fort Lauderdale, FL 33308
MGRM	Talmadge Cesco - 4300 N. Ocean Blvd. #98, Fort Lauderdale, FL 33308
(Use attachment if ne	cessary)
REQUIRED SIGN	murins
	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.)
	Mark Hopkins
	Typed or printed name of signee

SECRETARY OF STATE DIVISION OF CORPORATIONS