

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

Effective Date

7/11/13

From:

Account Name : A.A.ALI, CPA
Account Number : I20000000192
Phone : (407) 298-3900
Fax Number : (407) 298-0660

****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.
KIKI CARIBBEAN MARKET, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

RECEIVED

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

KIKI CARIBBEAN MARKET, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

PRINCIPAL ADDRESS: 8737 Wellesley Lake Drive Apt. 303, Orlando, FL 32818

MAILING ADDRESS: P.O. Box 680693, Orlando, FL 32868

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MARIE P. DORESTANT

8737 WELLESLEY LAKE DRIVE, APT. 303

ORLANDO, FL 32818

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 in Chapter 608, F.S..

x Marie P. Dorestant
MARIE P. DORESTANT / Registered Agent's Signature

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

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

"MGR" = Manager

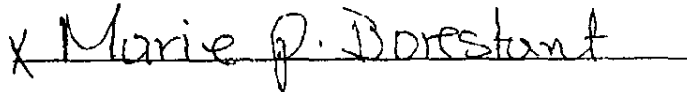
"MGRM" = Managing Member

MARIE P. DORESTANT, MGRM
8737 WELLESLEY LAKE DRIVE, APT. 303
ORLANDO, FL 32818

ARTICLE V: Effective date, if other than the date of filing: July 11, 2013

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after 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.)

MARIE P. DORESTANT

Typed or printed name of signee

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