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Florida Department of State
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To:

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

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Account Name : EMPIRE CORPORATE KIT COMPANY
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FLORIDA LIMITED LIABILITY CO.
LA FLORIDE LLC

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

ARTICLE I

The Name of the Limited Liability Company shall be :

LA FLORIDE LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the at.

ARTICLE III

The mailing address and street address of the principal office of the limited liability company is:

6825 BRIDLEWOOD COURT
BOCA RATON, FL 33433

ARTICLE IV

The name of the Managing Member and Manager(S) shall be:

MANAGING MEMBER/MANAGER

JOSEPHINE HAMOD
6825 BRIDLEWOOD COURT
BOCA RATON, FL 33433

MANAGER

EDOUARD HAMOD
6825 BRIDLEWOOD COURT
BOCA RATON, FL 33433

ARTICLE V

The name and Florida street address of the registered agent shall be:

JOSEPHINE HAMOD
6825 BRIDLEWOOD COURT
BOCA RATON, FL 33433

FILED
13 NOV 12 AM 9:27
CLERK OF CIRCUIT COURT
JALISSA J. HAMOD

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE**

LA FLORIDE LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Josephine Hamod

Signature of Registered Agent

Josephine Hamod

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)

JOSEPHINE HAMOD

Typed or printed name signee