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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name : EMPIRE CORPORATE KIT COMPANY

\$155.00

Account Number: 072450003255

Phone : (305)634~3694

Fax Number

: (305)633-9696

inter the email address for this business entity to be used for future-

مر annual report mailings. Enter only one email address please.**

Email Address:

<u>. NOV 1 9 2013</u>

FLORIDA LIMITED LIABILITY CO. FEATA ENTERPRISE NO. 6, LLC.

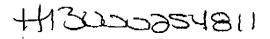
Certificate of Status Certified Copy 1 Page Count 03

Estimated Charge

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Help





ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Com	pany is:	
Feata Enterprise No. 5, LLC.		
(Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
11111111	of the principal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
8820 NW 12th Avenus	8920 NW 12th Avenue	
Miami, Florida 33150	Mlami, Florida 33150	
		•
The Limited Limbility Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address		01.40810183
The Limited Limbility Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address	of the registered agent are:	ć
The Limited Limbility Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address	of the registered agent are:	<u>.</u>
The Limited Limbility Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address Hou	of the registered agent are:	- C
The Limited Limbility Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address Hot	of the registered agent are: ward L. Kuker, Esq.	<u>.</u>
The Limited Limbility Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address Hot	of the registered agent are: Ward L. Kuker, Esq. Name Dadeland Boulevard, Suite 508 street address (P.O. Box NOT acceptable)	10 m

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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1412/12/2011 102/81/II

EMPIRE CORP



Title: "MGR" Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Albert K, Mayo
	8920 NW 12th Avenue
	Mlami, FL 33150
•	
<u></u>	
	20 G
(Use attachment if necessary)	
,	
LE V: Effective date, if other than the	ne date of filing: (OPTIONAL)
ffective date is listed, the date mu or 90 days after the date of filing.)	st be specific and cannot be more than five business days
REQUIRED SIGNATURE:	

constitutes a third degree felony as provided for in s.817 155, F.S.)

Albert K. Mayo

Typed or printed name of signee

(In accordance with section 608.408(3), Floridu Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated lierein are true, I am aware that any false information submitted in a document to the Department of State

Filing Four:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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EMPIRE CORP