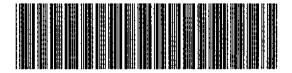
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## **COVER LETTER**

TO:	Registration Section Division of Corporations	· ·
SUBJE	CCT: DOLCE MAN	IAGEMENT & INVESTMENT PROPERTIES, L ne of Limited Liability Company
The end	closed Articles of Organization and	fee(s) are submitted for filing.
Please	return all correspondence concernin	g this matter to the following:
•	ROBER	Name of Person
		Firm/Company
		PLANTERS ROW Address
	GENEU	4 , IL. 60134 City/State and Zip Code
<del></del>		140TMAIL.Com o be used for future annual report notification)
For furt	te-man address. (ii) ther information concerning this ma	
Ron	Name of Person	at (847) 226-2983  Area Code Daytime Telephone Number
_	ed is a check for the following amount of Filing Fee \$130.00 Filing I Certificate of S	Fee & S155.00 Filing Fee & S160.00 Filing Fee,
	Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address  Registration Section  Division of Corporations  Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam	e: nited Liability Company is:					
The name of the Lin	inted Liability Company is.					
DOLCE	MANAGEMENT + (Must end with the words "Limited I	- INVE	STME KT pany, "L.L.C.," o	<i>PROPERT/</i> r"LLC.")	ES,	ددد
ARTICLE II - Add The mailing address	Iress: and street address of the principal of	fice of the Lin	nited Liability Co	mpany is:		
Principal Office Ac	ddress:	Mailing Ac	ldress:			
1871 Dog MARCO I	SW00D SLAND , FL- 34145	163 GEN	PLANTER Era, IL.	60134		
(The Limited Liabil another business en	gistered Agent, Registered Office, & ity Company cannot serve as its own Fitty with an active Florida registration for ida street address of the registered a	Registered Ag			2014	Carry 12.
	ROBERT	DOLCE	<del>, , , , , , , , , , , , , , , , , , , </del>		MAR 12	
	Florida street address (P.O. Box			Y OF STATE	P	
	MARCO ISLAND City	FL '	34(45 Zip	<b>新</b>	3: 42	i interna
the place design capacity. I further	d as registered agent and to accept servated in this certificate, I hereby accept ragree to comply with the provisions of I am familiar with and accept the oblicable.	the appointment of all statutes r	ent as registered a elating to the prop	igent and agree to per and complete	act in the performa	his ance
	Robert Do		ED)			
	Registered Agent's Signati	ure (KEQUIK	EU)			
	(CONTINUE	ED)				

Page 1 of 2

Title: "AMBR" = Authorized Men "MGR" = Manager	Name and Address:
CEO	ROBERT DOLCE
PRESIDENT	MARCO ISLAND, FL- 34145  MARTINIQUE TOHNS  1871 DOGWOOD
	MARCO ISLAND, FL. 34145
E V: Effective date, if other	han the date of filing: (OPTIONAL)  must be specific and cannot be more than five business days prior to or 90
E V: Effective date, if other ective date is listed, the date of filing.)	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90
E V: Effective date, if other ective date is listed, the date of filing.)	han the date of filing:
E V: Effective date, if other sective date is listed, the date of filing.)  E VI: Other provisions, if any Signat (In accordance with constitutes an affin I am aware that an	han the date of filing:
REQUIRED SIGNATURE  Signal  (In accordance with constitutes an affin I am aware that an	han the date of filing: