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ASIANS APR 2 8 2014

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LI2FL Holdings LLC Name of Lin	mited Liability Company
The enclosed Articles of Organization and fee(s) a	are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Evan Feldman	Name of Person
Law Office of Evan M Feldman	Firm/Company
5975 Sunset Drive, Suite 601	Address
S. Miami, Fl 33143	City/State and Zip Code
evan@evanfeldmanlaw.com E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, ple	ase call:
Evan Feldman at (at (at (305) 667-9489 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\text{Certificate of Status}\$	□\$155.00 Filing Fee & □\$160.00 Filing Fee. Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKTICLESUF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name:		
The name of the Limited Liability Company is:		
LI2FL Holdings LLC		
(Must end with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
5975 Sunset Drive Suite 601	5975 Sunset Drive Suite 601	
S. Miami, FL 33143	S. Miami,FL 33143	
(The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.) The name and the Florida street address of the registered a	.)	lual or
The name and the Florida sheet address of the registered a	gont a.e.	
Evan Feldman		
Name		
5975 Sunset Drive, Suite 601		
Florida street address (P.O. Box]	NOT acceptable)	
S. Miami	FL 33143	
City	Zip	
Having been named as registered agent and to accept serve the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obliging Chapter Registered Agent's Signature (CONTINUE) Page 1 of 2	the appointment as registered agent and agree to fall statutes relating to the proper and complete gations of my position as registered agent as pro or 605. S	o act in this performance vided for in
	OA P	0

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR/MGR	llene L. Nelson
	5975 Sunset Drive, Suite 601
	S. Miami, FL 33143
AMBR/MGR	Evan M. Feldman
<u></u>	5975 Sunset Drive, Suite 601
	S. Miami, FL 33143
(Use attachment if necessary)	
E V: Effective date, if other than the dat ective date is listed, the date must be spot filling.)	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 da
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ARTICLE IV-