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Division of Corporations

GEOFFREY M. WAYNE

GEOFFREY M. WAYNE, P.A.

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

From:
Account Name : GEOFFREY M. WAYNE, P.A.
Account Number : 076770003401
Phone : (305) 381-8108
Fax Number : (305) 381-8109

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: MEC@ABOGADDMIAMI.COM

FLORIDA LIMITED LIABILITY CO.
PC Outlet Supplies & Services LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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H14000195383 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is: **PC Outlet Supplies & Services LLC**

ARTICLE II- Address:

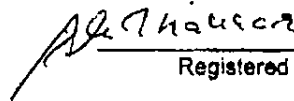
The mailing address and street address of the principal office of the Limited Liability Company is: 2169 NE 163 Street, North Miami Beach, FL 33162

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

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

Amin B Thakkar
2169 NE 163 Street
North Miami Beach, FL 33162

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 605, F.S.


Registered Agent's Signature

ARTICLE IV - Management

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:
AMBR/ P

Name and Address:

Amin B. Thakkar
1333 E Hallandale Beach Blvd.
April Song #416
Hallandale, FL 33009

AMBR/ VP

Akbar A. Lalani
Old Kampala Road
Haji's Building Unit 7
P.O.Box No. 37597
Kampala - Uganda

Manager

Janine M. Dacosta
1483 SW 85 Terrace
Pembroke Pines, FL 33025

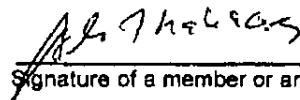
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ARTICLE V - Effective date, if other than the date of filing: _____

ARTICLE IV - Other Provisions, if any: _____


Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Amin B. Thakkar

H14000195383 3