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COVER LETTER

TO:	Registration Division of C	Section Corporations	•		
SUBJI	ECT: Franco	Bold and Company LLC Name of Lin	nited Liability Con	npany	
The en	closed Articles	of Organization and fee(s) as	re submitted for fil	ing.	
Please	return all corre	spondence concerning this m	atter to the followi	ng:	
	Ronald M	I. Henri	Name of Person		
			Name of Person		
	Franco B	old and Company LLC	Firm/Company		
	12985 N	E 4th Ave	Address		
	Miami, Fl	orida 33161	lity/State and Zip C	ode	
נין	nenri06@gmai		•		ation)
For fu	ther information	n concerning this matter, plea	ase call:		
Ronal	d M. Henri Nan	at (7	786) <u>853</u> Area Code		lephone Number
Enclos	ed is a check fo	r the following amount:			
\$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	y	☑\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street/Courier Address Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Con	npany is:		
Franco Bold and Company LLC (Must end with the	ne words "Limited Liab	lity Company, "L.L.C.," or	"LLC.")
ARTICLE II - Address: The mailing address and street address	of the principal office of	of the Limited Liability Con	npany is:
Principal Office Address:	<u>M</u>	ailing Address:	
12985 NE 4th Ave Miami, Florida 33161		985 NE 4th Ave ami. Florida 33161	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot another business entity with an active	ot serve as its own Regis		
The name and the Florida street address	s of the registered agen	t are:	
Ronald M. He	enri Name		
12985 NE 4th	n Ave address (P.O. Box NO)	r accentable)	
,	· · · · · · · · · · · · · · · · · · ·	•	
<u>Miami</u>	City	FL 33161 Zip	
Having been named as registered agen the place designated in this certifica capacity. I further agree to comply w of my duties, and I am familiar with	ate, I hereby accept the a vith the provisions of all and accept the obligation Chapter 60	sppointment as registered as statutes relating to the propons of my position as registe 5, F.S	gent and agree to act in this er and complete performance red agent as provided for in
Registe	red Agent's Signature ((CONTINUED)	REQUIRED)	14 OCT 15 AM SECRETARY OF ALLAHASSEE, FU
	(COMMITTED)		CO ~~ CD CD

#MGR	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
(Use attachment if necessary) RTICLE V: Effective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after date of filing. Lagraements between the managers listed above are as outlined in the attached operatino agreement led September 1, 2014. REQUIRED SIGNATURE: Signature of a premier or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statues, 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.) Typed or printed name of signee Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent		Ronald M. Henri
MGR Darnell Jasmin 5107 Pinehurst Dr Boynton Beach, Florida 33426 (Use attachment if necessary) XTICLE V: Effective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft date of filing.) XTICLE VI: Other provisions, if any. Lagreements between the managers listed above are as outlined in the attached operating agreement ted September 1, 2014. REOUIRED SIGNATURE: Signature of a premier 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.) Typed or printed name of signee Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent		
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(Use attachment if necessary) RTICLE V: Effective date, if other than the date of filing:	MOTE	5107 Pinehurst Dr
(Use attachment if necessary) RTICLE V: Effective date, if other than the date of filing:		
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\$ 5000 Certificate of Status (Ontional)	ATICLE V: Effective date, if other than the date of an effective date is listed, the date must be speed date of filing.) ATICLE VI: Other provisions, if any. agreements between the managers listed at ted September 1, 2014. REQUIRED SIGNATURE: Signature of a mer (In accordance with section 603 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	above are as outlined in the attached operating agreement mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document representative of perjury that the facts stated herein are true, mation submitted in a document to the Department of State yas provided for in s.817.155, F.S.) Typed or printed name of signee Filling Fees:
	ATICLE V: Effective date, if other than the date of an effective date is listed, the date must be speed date of filing.) ATICLE VI: Other provisions, if any. agreements between the managers listed a field September 1, 2014. REQUIRED SIGNATURE: Signature of a mer (In accordance with section 603 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony. \$125.00 Filing Fee for Articles of Org	above are as outlined in the attached operating agreement miler or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document representative of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.) Typed or printed name of signee Filing Fees: ganization and Designation of Registered Agent

ARTICLE IV-