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BECRETARY OF STATE

FALLAHASSEE, FLORIDA

KSALY EXAMINER APR - 8 2015

## **COVER LETTER**

TO:	Registration Division of	n Section Corporations		
SUBJE	ECT: <u>Veneti</u>	an Effects LLC Name of I	Limited Liability Company	
The en	closed Articles	s of Organization and fee(s)	are submitted for filing.	
Please	return all corre	espondence concerning this	matter to the following:	
	Michelle	Herauf	Name of Person	
			Name of Ferson	
	<u>Venetiar</u>	n Effects LLC	Firm/Company	
	2490 Ba	u Drivo Unit 4P		
	<u> 2100 ba</u>	y Drive, Unit 4B	Address	
	Miami Bo	each, Florida 33141	City/State and Zip Code	·····
_m	ichelle.heraut	f@gmail.com E-mail address: (to be u	sed for future annual report notifica	ation)
For fur	ther information	on concerning this matter, p	lease call:	
Miche	lle Herauf	at	( 305 ) 505-8660 Area Code Daytime Te	lephone Number
	Indi	ne of refson	Area Code Dayume Te	repriore Number
Enclose	ed is a check fo	or the following amount:		
□ \$125.0	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		iling Address	Street/Courier Add	<u>ress</u>
		gistration Section rision of Corporations	Registration Section Division of Corporate	tions
		Box 6327	Clifton Building	nong
		lahassee, FL 32314	2661 Executive Cen	ter Circle

Tallahassee, FL 32301

## $\textbf{ARTICLES\,OF\,ORGANIZATION\,FOR\,FLORIDA\,LIMITED\,LIABILITY\,COMPANY}$

ARTICLE I - Name: The name of the Limited Liability Company is:	EFFECTIVE DATE 3-11-2015	
Venetian Effects LLC (Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	-
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
2180 Bay Drive Unit 4B Miami Beach, FL 33141	2180 Bay Drive Unit 4B Miami Beach, FL 33141	- -
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.)  The name and the Florida street address of the registered Aliabetta Harry for the street address.	n Registered Agent. You must designate an indivi on.)	FILE OF 3: 19
Michelle Herauf Name	: : : :	
2180 Bay Drive Unit 4B Florida street address (P.O. Box	x <u>NOT</u> acceptable)	F. S. P.
Miami Beach	FL 33141	50° 0
City	Zip	
Having been named as registered agent and to accept se the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob- Chap  Registered Agent's Signal	ot the appointment as registered agent and agree of all statutes relating to the proper and complete of all statutes relating to the proper and complete of all statutes of my position as registered agent as proper 605, F.S	to act in this

Page 1 of 2

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