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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ARAZOZA & FERNANDEZ-FRAGA P.A.

Account Number : 076624003440

Phone : (305)444-6226

Fax Number : (305)442-4829

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

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FLORIDA LIMITED LIABILITY CO. UNIFORMS OF DORAL, LLC

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ARTICLES OF ORGANIZATION

OF

UNIFORMS OF DORAL, LLC

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Fiorida.

ARTICLE 1 NAME

The name of this Limited Liability Company is: UNIFORMS OF DORAL, LLC.

ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV

The principal office and mailing address of this Limited Liability Company in the State of Florida is 1203 NW 93 CT, DORAL, FL 33172. The Board of Managers may from time to time move the principal office to another address in Florida.

ARTICLE V REGISTERED OFFICE, REGISTERED AGENT

That UNIFORMS OF DORAL, LLC, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA P.A., as its Registered Agent, to accept services within the State. The registered office of the corporation shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

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ARTICLE VI MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The initial Manager shall be:

EDLEEN MORERA, of c/o 1203 NW 93 CT, DORAL, FL 33172

WITNESS the hand and seal of the Manager in Hialeah, Florida, the 1st day of May, 2015.

Edleen Morera

STATE OF FLORIDA

SS:

COUNTY OF MIAMI-DADE

PERSONALLY appeared before me, Edleen Morera, as Manager of UNIFORMS OF DORAL, LLC, for and on behalf of the entity, who is personally known to me, who being by me first duly sworn, acknowledges that she signed the same for the purposes therein expressed.

WITNESS my hand and seal at Miami-Dade County, Flor/da this 1st day of May, 2015.

LAURA KOHN
MY COMMISSION # EE 177665
EXPIRES: May 16, 2016
Bunded Thru Notery Public Underwriters

Notary Public
State of Florida at Large

My commission expires:

05/08/2015 09:30

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That UNIFORMS OF DORAL, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, has named Arazoza & Fernandez-Fraga P.A. as its Agent, of 2100 Salzedo Street, Suite 300, Coral Gables, FL 33134, to accept service of process within Florida.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

> The Registered Agent Arazoza & Fernandez-Fraga P.A Carlos F. Arazbza ✓ Director Date: April 1st, 2015