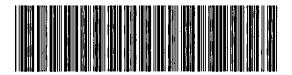
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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ERIC P. GROS-DUBOIS, ESQ.

DIRECT DIAL: (786) 837-6787 DIRECT FAX: (305) 718-0687 E-MAIL: ERIC@EPGDLAW.COM

October 26, 2015

VIA U.S. MAIL

Division of Corporations New Filing Section P.O. Box 6327 Tallahassee, FL 32314

RE: Wild Luxury Mall, LLC Articles of Organization

Dear Sir or Madam:

Enclosed please find the Articles of Organization for Wild Luxury Mall, LLC, along with a check payable to Florida Department of State in the amount of \$125.00. Should you have any questions or concerns regarding anything in this letter, please do not hesitate to contact me at the address or phone number provided herein.

Best Regards,

Eric P. Gros-Dubois, Esq.

For the Firm

Enclosures

## **COVER LETTER**

10:	Division of Corporations
SUBJEC	Wild Luxury Mall, LLC
SUBJEC	Name of Limited Liability Company
The encl	osed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	Eric P. Gros-Dubois, Esq.
,	Name of Person
	EPGD Attorneys at Law, P.A.
	Firm/Company
	2701 Ponce De Leon Blvd, Suite 202
	Address
	Coral Gables, Florida 33134
	City/State and Zip Code Eric@epgdlaw.com
	E-mail address: (to be used for future annual report notification)
For further	r information concerning this matter, please call:
	Eric Gros-Dubois, Esquire 786 837-6787
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.00	Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified of Status & Certified Copy (additional copy is enclosed)}
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
· · · · · · · · · · · · · · · · · · ·	
Wild Luxury Mall, LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office of the	he Limited Liability Company is:
Principal Office Address:	Mailing Address:
2701 Ponce De Leon Blvd, Suite 202	2701 Ponce De Leon Blvd, Suite 202
Coral Gables, Florida 33134	Coral Gables, Florida 33134
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	red Agent. You must designate an individual or
The name and the Florida street address of the registered agent a	re:
Eric P. Gros-Dubois, Esq.	
Name	

2701 Ponce De Leon Blvd, Suite 202

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Coral Gables

Florida street address (P.O. Box NOT acceptable)

Florida

City State Zip

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

33134

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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Roxana Frontini  888 Biscayne Blvd., Suite 3006  Miami, Florida 33132   W: Effective date, if other than the date of filing:  (OPTIONAL)  (OPTIONAL)  (iling.)  (other business days prior to or 90 that is listed, the date must be specific and cannot be more than five business days prior to or 90 that is listed, the date must be specific and cannot be more than five business days prior to or 90 that is effective date on the Department of State's records.  WI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, 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.  Eric P. Gros- Dubois, Esq., Authorized Representative  Typed or printed name of signee  Filing Fees:  125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	<u>`itle:</u> AMBR" = Authorized Member	Name and Address:
se attachment if necessary)  V: Effective date, if other than the date of filing:  (OPTIONAL)  ive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.)  e date inserted in this block does not meet the applicable statutory filing requirements, this date will non it's effective date on the Department of State's records.  VI: Other provisions, if any.  EQUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.  Eric P. Gros- Dubois, Esq., Authorized Representative  Typed or printed name of signee  Filing Fees:  125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	4GR" = Manager	
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ARTICLE IV-

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