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(Re	questor's Name)	
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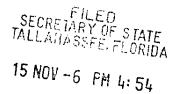
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SECRETARY OF STATE TALLAMISSEE, FLORIDA

NOV 18 2015 T CANNON

COVER LETTER

	Registration Section Division of Corporations		
SUBJEC"	Miami French Tutors, LLC		
SOBJEC		Limited Liabili	ty Company
The enclo	sed Articles of Organization and fee(s	s) are submitted	for filing.
Please ret	urn all correspondence concerning this	s matter to the fe	ollowing:
	Wally Niang		
		Name of	Person
	Miami French Tutors, LLC		
		Firm/Co	mpany
	1490 NW 57 Street		
	Marie de la companya	Addre	ess
	Miami, Florida 33142		
	wallyniang@hotmail.com	City/State and	d Zip Code
	E-mail address: (to be u	ised for future a	nnual report notification)
For further	information concerning this matter, pl	lease call:	
	Wally Niang	786	2235315
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00 E	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certific	0 Filing Fee & \$160.00 Filing Fee, ed Copy al copy is enclosed) \$Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing 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 Company is:	
---	--

Miami French Tutors,	LLC			
_ `		Liability Comp	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	lress of the principal o	office of the Lim	ited Liability Company is:	
<u>Principal</u>	Office Address:		Mailing Add	lress:
1490 NW 57 Street, M	iami, Florida 33142		1490 NW 57 Street, Miami,	Florida 33142
		 -		
ARTICLE III - Registered Agen (The Limited Liability Company canother business entity with an ac The name and the Florida street ac	annot serve as its own tive Florida registratio	Registered Age on.)		ndividual or
	Wally Niang			
		Name		
	1490 NW 57 Street			
,	Florida street addres	s (P.O. Box <u>NO</u>	T acceptable)	
	Miami	Florida	33142	
	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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
Wally Niang - MGR	1490 NW 57 Street, Miami, Florida 33142
Daniel Raoul - AMBR	1490 NW 57 Street, Miami, Florida 33142
Daniel Rada - Alfibra	1420 14W 37 Bucci, Maini, Horida 33142
	<u>ш ,</u>

(Use attachment if	
(Use attachment if necessary)	
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