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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)205-8842

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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.

Florida Retailers Association, LLC

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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12/16/2015

S. GILBERT

COVER LETTER

TO:

Registration Section Division of Corporations

15 DEC 16 PM 10: 43

SUBJECT:

Florida Retailers Association, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Fred L. Somers, Jr.

Name of Person

5579-B Chamblee Dunwoody Road

Firm/Company Address

Atlanta, Georgia 30338

City/State and Zip Code

fsomers@somerslawfirm.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fred L. Somers, Jr.

(77<u>0)</u>

843 7200

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$155.00 Filing Fee & Certified Copy

(additional copy is enclosed)

Mailing Address

Registration Section Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Registration Section Division of 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: Florida Retailers Association, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 7061 Grand National Dr unit #119

Orlando FI 32819

Mailing Address:

7061 Grand National Dr unit #119

Orlando Fl 32819

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Name CT Corporation System

Florida street address 1200 South Pine Island Road

City State Zip Plantation, FL 33324

ARTICLE IV — Manager — Managed

The Company is or will be manager-managed for purposes of s. 605.0407 and other relevant provisions of the Florida Revised Limited Liability Company Act in accordance with s. 605.0201(3)(a).

ARTICLE V – Limitations on Manager Authority

Except by the unanimous written agreement of the Primary Members, neither a Director nor any Officer shall have the authority to enter into any agreement, contract or commitment on behalf of the Company which would obligate any Member to contribute additional capital, to guarantee a loan or to increase a Member's personal liability either to the Company or to a third party.

Except by the affirmative vote of a majority of a quorum of the Primary Members, or as otherwise required by § 6.3.2 of the Company's Operating Agreement, neither a Director nor any Officer shall have the authority to: (1) Materially alter the business of the Company, deviate from any approved business plan of the Company as set forth in this Agreement, or perform any action which would make it impossible to carry on the business of the Company; (2) Perform any action that is contrary to this Agreement; (3) Place title to any Company asset or property in the name of a nominee or sell, lease, pledge, hypothecate, or grant a security interest in any Company asset or property, except in the ordinary course of business; (4) Commingle Company funds with the funds of any other Person or Entity; (5) Confess a judgment against the Company; (6) Admit any Person as a Member, except as otherwise provided in the Company's Operating Agreement; or (7) Except as may be effected by

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action pursuant to Section 17.3 of the Company's Operating Agreement, attempt to dissolve the Company.

ARTICLE VI - Names and Address(es) of Manager(s)

The names and addresses of the Manager(s) of the Company are:

Name

Amin Lalani

Florida street address
7061 Grand National Dr unit #119

· City State Zip Orlando, FI 32819

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..

Registered Agent's Signature (REQUIRED)

By: _______

Title: Assistant Secretary _____

ARTICLE VII: Effective date, if other than the date of filing: N/A

REQUIRED SIGNATURE:

Signature of a member 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. I hereby affirm that the company has or will have at least one member when the articles become effective).

Fred L. Somers, Jr.
Typed or printed name of signee

Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent and \$30.00 Certified Copy fee

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