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Florida Department of State

Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
DIAMOND VINTAGE COMPACTS LLC**

Certificate of Status	0
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INFORMATION SERVICES17 AUG 11 PM 7:31
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ARTICLES OF ORGANIZATION
OF
Diamond Vintage Compacts LLC

The undersigned member, for the purpose of forming a Limited Liability Company under the Laws of the State of Florida, hereby adopts the following Articles of Organization:

ARTICLE I

NAME

The name of the Limited Liability Company shall be:

Diamond Vintage Compacts LLC

ARTICLE II

PURPOSE

The company is organized for any legal and lawful purpose for which a Limited Liability Company may be organized pursuant to the act.

ARTICLE III

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:

3225 Ushant Ct
Wellington, FL 33414

17 AUG 11 AM 7:31
TALLAHASSEE, FL 32304
STATE OF FLORIDA

ARTICLE IV

INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial agent is:

Howard Diamond
3225 Ushant Ct.
Wellington, FL 33414

ARTICLE V

MEMBERS

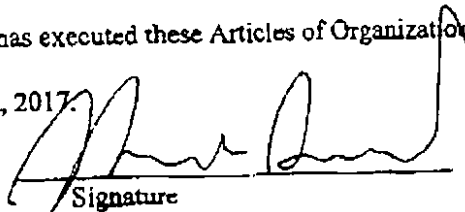
The Member(s) of the Limited Liability Company shall be:

Authorized Member: Soumaya Diamond
Address: 3225 Ushant Ct.
Wellington, FL 33414

Authorized Memeber: Howard Diamond
Address: 3225 Ushant CT.
Wellington, FL 33414

The undersigned has executed these Articles of Organization this

9st day of August, 2017.


Signature

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true..

SIGNATURE

Howard Diamond

TITLE _____ Authorized Member _____

DATE 8/9/17 _____

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THESE ARTICLES OF ORGANIZATION, 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.

SIGNATURE

DATE 8/9/17 _____

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