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## CORPORATE ACCESS, \_\_\_\_

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

	WALK IN
	PICK UP: 02/06/19
Хх	CERTIFIED COPY
	РНОТОСОРУ
	cus
хх	FILING LLC
1.	SAUMA PROPERTIES OF MIAMI, LLC (CORPORATE NAME AND DOCUMENT #)
2.	(CORPORATE NAME AND DOCUMENT #)
3.	(CORPORATE NAME AND DOCUMENT #)
4.	(CORPORATE NAME AND DOCUMENT #)
5.	(CORPORATE NAME AND DOCUMENT #)
6.	(CORPORATE NAME AND DOCUMENT #)
SPECIA	AL INSTRUCTIONS:

### COVER LETTER

то:	New Filing Section Division of Corporations		
SUBJEC	SAUMA PROPERTIES OF MIAMI,	LLC	
SUBSER		nited Liability Company	<del></del>
The encl	losed Articles of Organization and fee(s) are	e submitted for filing.	
	cturn all correspondence concerning this ma		
	Philip Sauma		
		Name of Person	
	Mood Designer Fabrics, Inc.		
		Firm/Company	
	225 West 37th Street, 3rd Floor		
		Address	
	New York, New York 10018		
	C philipsauma@gmail.com	ity/State and Zip Code	
	<del></del>	for future annual report notification	on)
For furthe	er information concerning this matter, please	call:	
		rea Code Daytime Telephone	: Number
Enclosed	d is a check for the following amount:		
	Filing Fee S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fcc. 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 Corporatio Clifton Building 2661 Executive Cente	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE				
The name of	the Limited Liability Company	is:		
<u>s</u>	AUMA PROPERTIES OF MIA	MI, LLC		
	(Must contain the word		mpany, "L.L.C.,"	or "LLC.")
ADTICLE	l - Address:			
	address and street address of the	nzincinal office of the	l imienal i interior.	C
5	and the street addices of the	principal office of the	Limited Liability	Company is:
	Principal Office Ad	dress:		Mailing Address:
	25 West 37th Street, 3rd Floor		225 West 37th	Street, 3rd Floor
<u>1</u>	New York, New York 10018			w York 10018
_				
another busi	II - Registered Agent, Register I Liability Company cannot serve mess entity with an active Florida d the Florida street address of the	e as its own Registered a registration.)	ed Agent's Signa Agent. You must	ture: designate an individual or
	NKAI Ser	vices, Inc.		<del></del>
		Name		
		th Pine Island Road		
	1200 Sou	in Fine Island Road		
		reet address (P.O. Box	NOT acceptable)	
		reet address (P.O. Box		33324

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 statues 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)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member "MGR" = Manager AMBR  Philip Sauma  225 West 37th Street, 3rd Floor New York, New York 10018  AMBR  Eric Sauma  225 West 37th Street, 3rd Floor New York, New York 10018  (Use attachment if necessary)  LE V: Effective date, if other than the date of filing: February 5, 2019  fective date is listed, the date must be specific and cannot be more than five business days prior to of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date sument's effective date on the Department of State's records.  LE VI: Other provisions, if any.	"MGR" = Manager AMBR	225 West 37th Street, 3rd Floor
AMBR  Philip Sauma  225 West 37th Street, 3rd Floor New York, New York 10018  Eric Sauma  225 West 37th Street, 3rd Floor New York New York 10018  (Use attachment if necessary)  EV: Effective date, if other than the date of filing: February 5, 2019 fective date is listed, the date must be specific and cannot be more than five business days prior to of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date insert's effective date on the Department of State's records.	AMBR	225 West 37th Street, 3rd Floor
AMBR  Eric Sauma  225 West 37th Street, 3rd Floor New York, New York 10018  Eric Sauma  225 West 37th Street, 3rd Floor New York, New York 10018  (Use attachment if necessary)  EV: Effective date, if other than the date of filing: February 5, 2019 (ective date is listed, the date must be specific and cannot be more than five business days prior to filing.)  The date inserted in this block does not meet the applicable statutory filing requirements, this date ment's effective date on the Department of State's records.		225 West 37th Street, 3rd Floor
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	E VI: Other provisions, if any.	1
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DECUMPED SIGNATURE	DECUMPED CLCV ATURE	//
REQUIRED SIGNATURE:	KT.UIIIKPUXIIXAIIIDE:	
	MODELLE SKINA LUKE,	//// - <del></del>
Signature of a member of an authorized representative of a man-	SIGNATURE.	
- and the member of an authorized teliteritative of a member.		mher at an authorized representative of a member
I his document is executed in accordance with section 605 0203 (1) (b) Florida &	Signature of a me This document is execut	mber or an authorized representative of a member. — ed 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	Signature of a me This document is execut I am aware that any false	ed in accordance with section 605.0203 (1) (b), Florida Statutes.
This document is executed in accordance with section 605.0203 (1) (b), Florida St I am aware that any false information submitted in a document to the Department constitutes a third degree felony as provided for in s.817.155, F.S.	Signature of a me This document is execut I am aware that any false	ed in accordance with section 605.0203 (1) (b), Florida Statutes.
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