Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:	Division of Corporations		
	Fax Number	: (850)617-6381	
From:			-F-
	Account Name	: LAZARUS CORPORATE FILING SERVICE, IN	
	Account Number	: I20000000019	
	Phone	: (305)552-5973	
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FLORIDA LIMITED LIABILITY CO. RAINBOW FRENCHIES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Rainbow Frenchies LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
2950 SW 103 d ave	_
2950 SW 103 d ave Miani Fl 33165	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration)	19 FEB 26
Ivana F Morales	A 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2950 Sw 103 rd Ave Miani F1 33165	AT OHS
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR) TV Gra F. Morous (AMBR) 2950 GW 103 cd AVR	<u></u>
Miami, F1 33165	
,	

Required Signatures:

3052201440

Signature of a member or an authorized representative of a member.

In accordance with section 505.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perfury 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.

Typed or printed name of signee

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 695, F.S..

> Registered Agent Signature (REQUIRED)