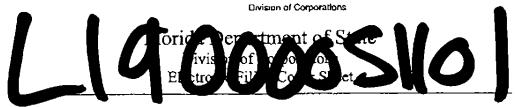
2/27/2019



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To:

Division of Corporations

: (850)617-6381 Fax Number

From: Carrie Ramos, FRP, Paralegal - PLEASE FAX CONFIRMATION TO 407 244-5690 Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : 120010000078 : (407)843-8880 Phone

Fax Number : (407)244-5590

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: bisser@livetrendsdesign,com

FLORIDA LIMITED LIABILITY CO. LiveTrends Holdings Company, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 Name

The name of this Limited Liability Company is:

LiveTrends Holdings Company, LLC

ARTICLE II Address

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

1350 Sheeler Avenue, Suite 1 Apopka, FL 32703

ARTICLE III Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV Initial Board of Managers

This Limited Liability Company shall have one (1) manager initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be less than one.

The name and address of the initial manager of this Limited Liability Company is as follows:

Name
Street Address

Bisser Georgiev

1350 Sheeler Avenue, Suite 1
Apopka, FL 32703

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ARTICLE V Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

Bisser Georgiev 1350 Sheeler Avenue, Suite I Apopka, FL 32703

Having been named as registered ugent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.

-REGISTERED AGENT'S SIGNATURE

In accordance with Section 605.0203(1)(b), Plorida 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 Jejony as provided in Section 817.155, Plorida Statutes.

AUPHORIZED REPRESENTATIVE'S SIGNATURE

BISSER GEORGIEV, AUTHORIZED REPRESENTATIVE
Type or printed name of signee

FILING FEBS: \$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30.00 Certified Copy (OPTIONAL) \$5.00 Certificate of Status (OPTIONAL) 19 FEB 27 AN ED: 30