Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 : (561)694-8107 : (561)214-8442 Fax Number

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

Email	Address:	;			

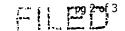
FLORIDA LIMITED LIABILITY CO.

Geoffroy Corporate Holdings, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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Help



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE TALLAMASSEE, FL

ARTICLE I - Name:				TALL	
The name of the Limited Liability	Company is:			(ALL/	
Geoffroy Corporate Ho	oldings, LLC				
(Must contai	n the words "Limited Lia	bility Con	pany, "L.L.C.," or "LLC.")		
ARTICLE II - Address:					
The mailing address and street add	lress of the principal offic	ce of the L	imited Liability Company is:		
Principal	Office Address:		Mailing Address:		
328 Coral Way		_	328 Coral Way		
Fort Lauderdale, FL 3.	3301		Fort Lauderdale, FL 33301		
ARTICLE III - Registered Agen (The Limited Liability Company of another business entity with an act	annot serve as its own Re tive Florida registration.)	egistered A	gent. You must designate an individu	ual or	
	Comiter, Singer, Basem		nn li P		
		lame	uq btd		
	3825 PGA Blvd., Suite	701			
	Florida street address (I	P.O. Box	(OT acceptable)		
	Palm Beach Gardens	L	33410		
	City	State	Zip		

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)

(CONTINUED)

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
_	Vincent Genffrey	
MGR	Vincent Geoffroy 328 Coral Way	_
	Fort Lauderdale, FL 33301	-
		-
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(Use attachment if necessary)		
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)