Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Phone : (305)444-4977 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. NAPAMIAMI LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

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To: 18506176381

ARTICLES OF ORGANIZATION FOR FLO	RIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	
NAPAMIAMILLC	
(Must contain the words "Limited Liab	dity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
520 Brickell Key Dr #A1619	520 Brickell Key Dr. #A1619
Miami, FI. 33131	Miami, FL 33131
ARTICLE III - Registered Agent, Registered Office, & R (The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.)	tegistered Agent's Signature: gistered Agent. You must designate an individual or
The name and the Florida street address of the registered age	ent are:
Nicole Fikri	
N	ame

 520 Brickell Key Dr. #A1619

 Florida street address (P.O. Box NOT acceptable)

 Miami
 FL
 33131

 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..

Nicole Fikri deservation of the College of the Coll

(CONTINUED)

dollers signature verifications day to Amazon 1991

Title: "AMBR" = Authorized Membe	Same and Address:
"MGR" = Manager	
MGR	Nicole Fikri 520 Brickell Key Dr. #A1619 Miami, FL 33131
MGR	Paul Jean Fikri 520 Brickell Kev Dr. #A1619 Miami, FL 33131
(Use attachment if necessary)	
CLEV: Effective date, if other that effective date is listed, the date mute of filing.)	in the date of filing:
CLEV: Effective date, if other that effective date is listed, the date mute of filing.) If the date inserted in this block document's effective date on the Department.	ust be specific and cannot be more than five business days prior to or 90 day loes not meet the applicable statutory filing requirements, this date will not be
CLEV: Effective date, if other that effective date is listed, the date mute of filing.) If the date inserted in this block document's effective date on the Department.	ust be specific and cannot be more than five business days prior to or 90 day loss not meet the applicable statutory filing requirements, this date will not be partment of State's records.
CLE V: Effective date, if other that effective date is listed, the date me te of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's effective date on the Department's effective date on the Department Signature This document I am aware that	ust be specific and cannot be more than five business days prior to or 90 day loss not meet the applicable statutory filing requirements, this date will not be partment of State's records.

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)