

L21000 485794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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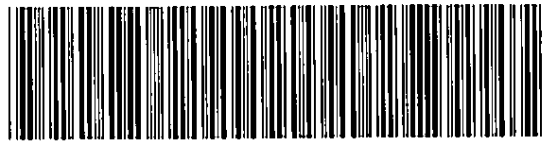
(Business Entity Name)

(Document Number)

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

MERAKI PROPERTIES CAPETOWN, LLC

Signature _____

Requested by: _____

Name _____ Date _____ Time _____

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_____ Art of Inc. File _____
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_____ Certificate of Fictitious Name _____
_____ Corp Record Search _____
_____ Officer Search _____
_____ Fictitious Search _____
_____ Fictitious Owner Search _____
_____ Vehicle Search _____
_____ Driving Record _____
_____ UCC 1 or 3 File _____
_____ UCC 11 Search _____
_____ UCC 11 Retrieval _____
_____ Courier _____

ARTICLES OF ORGANIZATION
OF
MERAKI PROPERTIES CAPETOWN, LLC
(a Florida Limited Liability Company)

The undersigned executes these Articles of Organization to form a limited liability company under the laws of the State of Florida and declares that the following articles shall serve as the charter and authority for the conduct of business of the limited liability company.

ARTICLE I.
NAME

The name of the limited liability company is MERAKI PROPERTIES CAPETOWN, LLC.

ARTICLE II.
ADDRESS

The mailing address and street address of the principal office of the limited liability company is:

Principal Office Address:

2318 7th Avenue West
Bradenton, FL 34205

Mailing Address:

2318 7th Avenue West
Bradenton, FL 34205

ARTICLE III.
REGISTERED AGENT, REGISTERED OFFICE,
REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

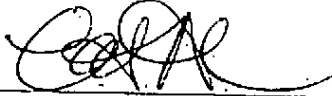
CATHERINE A. CHIS
2318 7th Avenue West
Bradenton, FL 34205

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

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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, Florida Statutes.



Registered Agent Signature



CATHERINE A. CHIS, Member

(This document is executed 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 State constitutes a third-degree felony as provided for in S.817.155, F.S.)