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Florida Department of State
Division of Corporations
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To:

Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
MR. GOMA OUTLET, LLC.**

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MS

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

MR. GOMA OUTLET, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

MR. GOMA OUTLET, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

**4040 E 10TH CT
HIALEAH, FL 33013**

The mailing address shall be:

**4040 E 10TH CT
HIALEAH, FL 33013**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

JEAN COHEN

4040 E 10TH CT
Florida Street address (P.O.BOX NOT acceptable)
HIALEAH, FL 33013
City, State, and Zip

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TALLAHASSEE, FL
STATE

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

ARTICLE IV- MANAGEMENT

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

JEAN COHEN
4040 E 10TH CT
HIALEAH, FL 33013

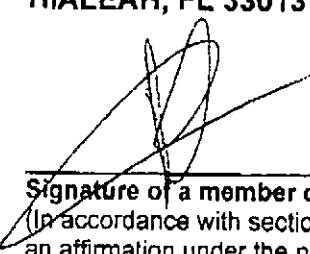
AMBR

ROCIO AHUMADA
4040 E 10TH CT
HIALEAH, FL 33013

MGR

KATHERIN COHEN
4040 E 10TH CT
HIALEAH, FL 33013

SECRETARY


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

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JEAN COHEN

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