Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 900001951959 -09/19/96--01096--002 ****285.00 ****285.00

SUBJECT:	Proposed limited liability con	DALL C. pany name - must include suff	ix)
\$285.00	and one (1) copy of the a	\$337.50	\$ 346,25
Filing Fee & Registered Agent designation	Filing Fee, Registered Agent Designation & Certificate	Filing Fee, Registered Agent Designation & Certified Copy	Filing Fee, Registered Agent Designation, Certified Copy & Certificate
FROM:		ord (regul	25 SEP 19
	1358 NW 8	ddress	
	(954) 572	33351 State & Zip - 3409	jen –

NOTE: Please provide the original and one copy of the articles.

(SEP 2 0 1996 356)

September 16, 1996

Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Dear Sir/Madam:

I am applying for limited liability corporate status for my new company, Pamper & Dine. Per your instructions, enclosed please find the following:

Transmittal Letter for Florida Limited Liability Company
Articles of Organization for Florida Limited Liability Company
Affidavit of Membership and Contributions
Certificate of Designation of Registered Agent/Registered Office
Check in the amount of \$285, Filing Fee & Registered Agent designation

Should you have any questions or require any additional information, please do not hesitate to call me on (954)-572-3409 or write to me at the following address.

Marilyn Gifford Organ 3258 NW 88th Ave. Sunrise, FL 33351

Thank you for your assistance.

Sincerely,

Marilyn Gifford Organ

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

95 SEP 19 All OLLY INCOMESSE OF LONION

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Pamper a Dive, LLC

ARTICLE II - Address:

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

3258 NW 8845 Ne

3258 NW 8814 NVE Sunrise, FL 33351

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management: (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

Marilya Cofford Organ 3358-WW 88th Art. Sunrice, FL 33351 Matthew J. Cigal 3258 NW. 1887 Ave Suurise, FL-33351

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

Remaining members of Pampera Dine LLC shall have the right to continue the business upon the death, retirement, resignation, expulsion, bank-ruptcy or dissolution of a member or the ruptcy or dissolution of a member or the occurance of any other event which terminates the continued membership of a member in the time Tamper at Dine.

NOTE: If no provisions are to be made in Artice V and VI remove this page before submitting for filing with the Department of State.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of	Pamper-
of DINP, LLC	deposes and says:
1) the above named limited liability company has at least two members	
2) the total amount of cash contributed by the member(s) is	s <u>/00-</u> .
 if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto. 	\$
4) the amount of cash or property anticipated to be contributed by member(s) is	s
5) the total amount of 2, 3, and 4 is	s <u>/00-</u> .
Signature of a member or anthorized representative of a member. (In accordance with section 608.408(3), Floride Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:	
Pamper a Dire, L. C.	
2. The name and address of the registered agent and office is:	
Marily Coffeed Degan	
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
SUNTISE FL 3335/	

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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.

Minh Enferz Open 9/16/96 (Date)

Filing Fee: \$ 35 for Designation of Registered Agent