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From:

Account Name : USA CORPORATE SERVICES INC.

Account Number : I20000009220 Phone : (800)891-7432

Fax Number : (518) 433-1489

#### LIMITED LIABILITY COMPANY

#### MID LIFE LLC

Certificate of Status	0
Certified Copy	1
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# ARTICLES OF ORGANIZATION OF

# MID LIFE LLC Pursuant to section 608.407, Florida Statutes

- 1. The name of the Limited Liability company is: MID LIFE LLC
- The mailing address and street address of the principal office of the Limited Liability Company is:

### C/O THE LLC, 9500 S. DADELAND BLVD., SUITE 610, MIAMI, FL 33156

3. The name and address of the registered agent is as follows:

### MATTHEW DELUEA, 9500 S. DADELAND BLVD., SUITE 610, MIAMI, FL 33156

- 4. The period of duration for the Limited Liability Company shall be perpetual.
- 5. The Limited Liability Company is to be managed by member(s) and the name(s) and address(s) of such members(s) are as follows:

MATTHEW DELUCA JR., 9500 S. DADELAND BLVD., SUITE 610, MIAMI, FL 33156 ROBERT DIAMOND, 105 MAIN STREET, PORT WASHINGTON, NY 11050

In Witness Whereof, in accordance with section 608.408(3), Florida Statutes, the execution of this document constitute an affirmation under the penalties of perjury that the facts stated herein are true, this day 4th day of November 2003.

Frank Orlando

**Authorized Representative** 

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## Acceptance of Appointment as Registered Agent

#### MID LIFE LLC

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 am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S

Dated: November 4, 2003

Matthew Deluca, Jr.

Registered Agent

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