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Account Name : BUSINESS FILINGS  
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LIMITED LIABILITY COMPANY

Bendigo, LLC

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

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FAX AUDIT # H050000301733

**ARTICLES OF ORGANIZATION  
OF  
Bendigo, LLC**

**ARTICLE I NAME**

The name of the limited liability company shall be: **Bendigo, LLC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: **53 NW 50th Street, Miami, Florida 32127.**

**ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: **Simon Stojanovic, 53 NW 50th Street, Miami, Florida 32127. Located in the County of Miami-Dade.**


**ARTICLE IV DURATION**

The duration for the limited liability company shall be: **12/31/2045.**

**ARTICLE V MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

**Simon Stojanovic, 53 NW 50th Street, Miami, Florida 32127**

  
Business Filings Incorporated, Organizer  
Mark Schiff, AVP  
Authorized Representative  
Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,  
Madison, WI 53717  
(608) 827-5300

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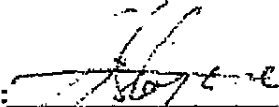
**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Bendigo, LLC**

The name and address of the registered agent and office is Simon Stojanovic, 53 NW 50th Street, Miami, Florida 32127. Located in the County of Miami-Dade.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:   
Simon Stojanovic

Date: January 21, 2005

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