

W05000032935

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

RECEIVED
05 APR -4 PM 1:00
DIVISION OF CORPORATION

FILED
2005 APR -4 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

interactive revenues solutions, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

W05-32935
OK

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Interactive Revenues Solutions, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

Interactive Revenues Solutions, LLC
1717 North Bayshore Drive, #A-1840
Miami, Florida 33132

Interactive Revenues Solutions, LLC
1717 North Bayshore Drive, #A-1840
Miami, Florida 33132

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Brad Steven Fleet, Esq.
Name

The SunTrust Building, 1111 Lincoln Road Mall, #810
Florida street address (P.O. Box NOT acceptable)

Miami Beach, Florida 33139
City, State, and Zip

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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 as provided for in Chapter 608, F.S.

Brad Steven Fleet

Registered Agent's Signature

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Darren Mankovich

301 Ocean Drive, #505

Miami Beach, Florida 33139

MGRM

Ryan Jacobs

191 Palm Avenue

Miami Beach, Florida 33139

MGRM

Tsvi Katsir

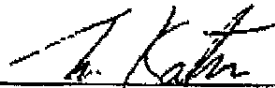
1717 North Bayshore Drive, #A-1840

Miami, Florida 33132

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Tsvi Katsir

Typed or printed name of signer

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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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