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

From: Account Name : TRIAD PROFESSIONAL SERVICES, LLC  
Account Number : T20020000094  
Phone : (770)777-2091  
Fax Number : (770)220-1943

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LIMITED LIABILITY COMPANY

AB REGIS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
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ARTICLES OF ORGANIZATION

OF

AB REGIS, LLC

ARTICLE I - Name

The name of the Limited Liability Company is AB REGIS, LLC (the "Company").

ARTICLE II - Address

The mailing address and street address of the principal office of the Company is c/o Greenberg Traurig, P.A., 1221 Brickell Avenue, Miami, Florida 33131.

ARTICLE III - Management

The Company shall be managed by its manager(s), as set forth in the company's Operating Agreement and is therefore a manager-managed Company.

ARTICLE IV - Registered Agent and Office

The name and street address of the Company's initial registered agent and office is NRAI Services, Inc., 2731 Executive Park Drive, Suite 4, Weston, Florida 33331.

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.

Dated this 23<sup>rd</sup> day of December, 2005.



Debra Palmisano, Authorized Person

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**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT**

The undersigned, having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 608.

Dated this 2<sup>nd</sup> day of December, 2005.

NRAI SERVICES, INC.

By:   
Name: Sharon M. Knaf  
Title: Assistant Secretary

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