

Division of Corporations

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

From: Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

**FLORIDA/FOREIGN LIMITED LIABILITY CO**

**ATLAS SERVICES & ACCESSORIES LLC**

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

ATLAS SERVICES & ACCESSORIES LLC

**ARTICLE II ADDRESS**

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

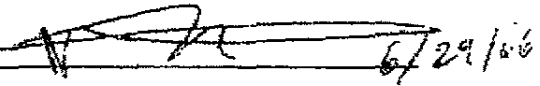
8857 PARLIAMENT COURT  
KISSIMMEE FL 34747

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE**

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

NAIMA LAZHARI  
8857 PARLIAMENT COURT  
KISSIMMEE FL 34747

Having been named as registered agent to accept service of process for the above state 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 all statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

  
\_\_\_\_\_

NAIMA LAZHARI / Registered Agent's Signature

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

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**ARTICLE V**

The name(s), address(es), and title(s) of the MANAGING MEMBER(S):

MANAGING MEMBER: NAIMA LAZHARI  
8857 PARLIAMENT COURT  
KISSIMMEE FL 34747



6/29/06

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.)

NAIMA LAZHARI  
Typed or printed name of signee

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