

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 : (305) 673-0347
Fax Number : (305) 532-0738

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

THE PENTHOUSE, LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

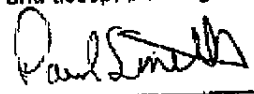
ARTICLE I NAME
The name of the Limited Liability Company is:
THE PENTHOUSE, LLC

ARTICLE II ADDRESS
The mailing address and street address of the principal office of the Limited Liability Company is:
**C/O NEFERTERI SHEPHERD 1100 WEST AVE #307 CENTER BUILDING
MIAMI BEACH, FL 33139**

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE
The name and the Florida street address of the registered agent are:
**FLORIDA AGENT SERVICES, INC.
1221 BRICKELL AVE. SUITE 900
MIAMI, FL 33131**

02 SEP 17 AM 8:15
MILWAUKEE, FLORIDA

Having been named as registered agent 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.



Registered Agent's Signature

ARTICLE IV MANAGEMENT
The Limited Liability Company is to be managed by one member or more members and is therefore a member managed company.

ARTICLE V MEMBERS (optional)
Managing Member:
**ANNA E. GORDH
C/O NEFERTERI SHEPHERD 1100 WEST AVE #307 CENTER BUILDING
MIAMI BEACH, FL 33139**

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Adrienne E. Larkin

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.

ADRIENNE E. LARKIN

Typed or printed name of signee

02 SEP 17 AM 8:15
MILWAUKEE, FLORIDA

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